BlueCross BlueShield of Oklahoma

How-to Set Up Consumer Directed Health Accounts

Health Savings Accounts (HSA), Flexible Spending Accounts (FSA) and Health Reimbursement Arrangements (HRA) with Vendor Integration

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Blue Cross and Blue Shield of Oklahoma, a Division of Health Care Service Corporation,
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Introduction to Integrated Consumer Directed Health Products

Blue Cross and Blue Shield of Oklahoma (BCBSOK) offers spending and savings accounts through three preferred HSA, FSA and HRA administrators: Flexible Benefit Service LLC (Flex®), HealthEquity® and HSA Bank®. When you choose one of these vendors, our product offers optimal user experience and flexibility by giving members and employers more control, integration, and transparency.

HSA Integration Features

We have established relationships with preferred health savings account (HSA) vendors to improve the employer and member experience with our HSA compatible High Deductible Health Plans. There are many advantages to choosing one of our preferred vendors to administer a BCBSOK HSA, including preferred pricing and a simple, efficient HSA experience for both employer and employees. Please contact your BCBSOK representative for preferred pricing.

	Flex	HealthEquity	HSA Bank
Eligibility File Integration	X	X	X
Online Access to HSA Information	X	X	X
BAM Single Sign-On Functionality	X	X	X
Claims Integration	X	X	X
Tier 1 Call Support	X	X	X

Eligibility File Integration

We transmit daily eligibility files to preferred vendors to upload membership. Eligibility file integration reduces employee and employer effort. Once we receive a group's enrollment data, we automatically pass it to the vendor.

For existing HealthEquity clients wishing to have the integration features, please contact HealthEquity directly to determine if eligibility should continue in existing state or through the health plan.

Online Access to HSA Information

Members can view their current HSA account balances and recent transactions on Blue Access for Members℠ (BAM℠) or the mobile app.

Single Sign-On (SSO) Functionality

Members are able to access their preferred vendor's website directly through BAM without additional user IDs or passwords.

Claims Integration

We provide claims integration with our preferred vendors at no extra implementation or administrative costs. We pass daily claim files through our vendor interface, giving employees simple payment options in addition to the vendor's standard payment options. This means members can pay for their medical expenses directly from the preferred vendor's site with one click. (Integration functionality may differ by vendor.)

Tier 1 Call Support

Our service teams offer Tier 1 support, providing members with HSA account information such as current balance and recent transaction activity.

FSA Integration Features

We have established relationships with preferred flexible spending account (FSA) vendors to improve the employer and member experience with our Consumer Driven Health Plan (CDHP) products. There are many advantages to choosing one of our preferred vendors to administer an FSA, including preferred pricing and a simple, efficient experience for both employer and employees. Please contact your BCBSOK representative for preferred pricing.

Exclusions:

FSA with vendor Integration is not available for clients enrolling through Blue Directions, Bentegro or DocuSign enrollment channels. These clients must enroll using Blue Access for Employers℠ (BAE℠) or large groups can use Any Time Load (ATL) if integration is desired.

The FSA plan year must coincide with the health plan year to have integration.

FSA integration is available to HealthEquity new business only due to their various platforms. For existing HealthEquity clients, please contact HealthEquity directly to determine if migration can occur.

	Flex	HealthEquity	HSA Bank
Enrollment File Integration		X	X
Online Access to FSA Information		X	X
BAM Single Sign-On Functionality		X	X
Claims Integration	X	X	X
Tier 1 Call Support		X	X

Enrollment File Integration

We will transfer daily enrollment files, including employee FSA annual election amounts to the preferred vendors. This integration feature reduces employer effort. Once enrollment data has been submitted, we will automatically pass it to the vendor.

We can send enrollment for Health Care FSA and Limited Purpose FSA. We cannot send enrollment for Dependent Care FSA, Commuter/Transit FSA, or for any employee not enrolled in our health plan. The employer can choose to send FSA enrollment directly to the vendor if desired.

Online Access to FSA Information

Members can view their current FSA balances and recent transactions on Blue Access for Members℠ (BAM℠) or the BCBSOK mobile app.

Single Sign-On Functionality

Members are able to access their FSA vendor's website directly through BAM without additional user IDs or passwords.

Claims Integration

We provide claims integration with our preferred spending account vendors at no extra implementation or administrative costs. We pass daily claim files through our vendor interface, giving employees simple payment options in addition to the vendor's standard payment options. This means members can quickly substantiate or

pay for their medical expenses directly from the preferred vendor's site with one click. (Integration functionality may differ by vendor.)

Tier 1 Call Support

Our service teams offer Tier 1 support, providing members with FSA account information such as current balance and recent transaction activity.

HRA Integration Features

We have a relationship with preferred health reimbursement arrangement (HRA) vendors. Preferred pricing and a simple, efficient experience for both employer and member are among the many advantages of choosing one of these vendors to administer a BCBSOK HRA. Please contact your BCBSOK representative for preferred pricing. Vendors have different capabilities for administering HRA's. It is important to confirm the plan design with the vendor before committing to a client.

Exclusions:

HRA with vendor Integration is not available to Small Group or Blue Balanced Funded℠. It is not available for clients enrolling through Blue Directions, Bentegro or DocuSign enrollment channels. These clients must enroll using BAE or large groups can use ATL if integration is desired.

The HRA plan year must coincide with the health plan year to have integration.

HRA integration is available to HealthEquity new business only due to the various platforms. For existing HealthEquity clients, please contact HealthEquity directly to determine if migration can occur.

	Flex	HealthEquity	HSA Bank
Enrollment File Integration		X	X
Online Access to FSA Information		X	X
BAM Single Sign-On Functionality		X	X
Claims Integration	X	X	X
Tier 1 Call Support		X	X

Enrollment File Integration

We will transfer daily enrollment files to preferred vendors. This integration feature reduces employer effort. Once enrollment data has been submitted, we will automatically pass it to the vendor.

Online Access to HRA Information

Members can view their current HRA balances and recent transactions on Blue Access for Members℠ (BAM℠) or the BCBSOK mobile app.

Single Sign-On Functionality

Members are able to access their HRA vendor's website directly through BAM without additional user IDs or passwords.

Claims Integration

We provide claims integration with our preferred vendors at no extra implementation or administrative costs. We pass daily claim files through our vendor interface, giving employees simple payment options in addition to the vendor's standard payment options. This means members can quickly substantiate or pay for their medical expenses directly from the preferred vendor's site with one click. (Integration functionality may differ by vendor. It is important to confirm whether the vendor can support the plan design before committing to a client.)

Tier 1 Call Support

Our service teams offer Tier 1 support, providing members with HRA account information such as current balance and recent transaction activity.

Preferred Pricing

Preferred pricing is offering by all four of our vendors. Contact your BCBSOK representative for pricing.

Vendor Contact Information

Our vendors are prepared to answer your questions and offer enrollment and educational brochures for both the employers and their employees. It is especially important to contact the vendors for sales support prior to an HRA sale.

	Flex	HSA Bank	HealthEquity
Sales email	fpsales@flexiblebenefit.com	salessupport@hsabank.com	brokersales@healthequity.com

To discuss existing HealthEquity client enrollment or migration, contact brokerservices@healthequity.com.

Completing the Benefit Program Application (BPA)

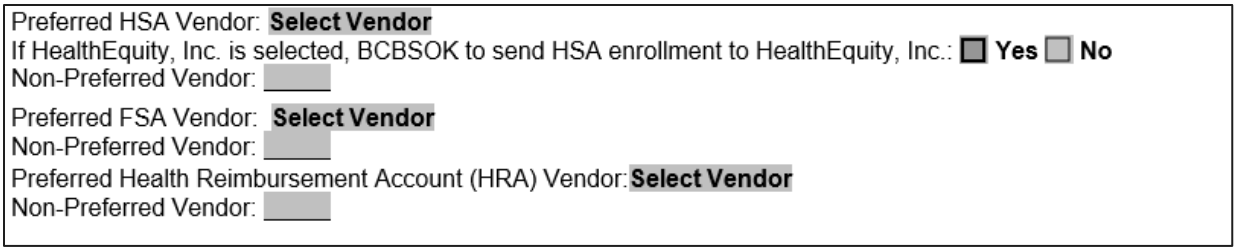
Complete the BPA for new sales or BPA Amendment for renewing clients and select the appropriate vendor for HSA/FSA/HRA from the dropdown menu.

If FSA or HRA is selected, it is best practice to have all paperwork submitted to us 30 days prior to the effective date to ensure the vendor can generate debit cards, if applicable, prior to the effective date.

We are working to remove BenefitWallet from the next paperwork release. Until then, please do not select BenefitWallet.



Oklahoma Small Group BPA



Oklahoma Mid-Market BPA

Important HealthEquity Note:

- **HSA:** For existing HSA HealthEquity clients, please contact HealthEquity directly to determine if eligibility should continue in existing state or through the health plan. If eligibility should not be sent through the health plan integrated file, on the BPA select HealthEquity as the Preferred HSA Vendor and "**NO"** for BCBSOK to send HSA Enrollments to HealthEquity, Inc. to ensure we do not send HSA eligibility. Refer to the Selecting HealthEquity section in the Appendix for detailed instructions and examples.
- **FSA/HRA:** Reminder, if client has an **existing** FSA or HRA with HealthEquity, integration is not available, and Non-Preferred Vendor should have HealthEquity written in, unless migration occurs with HealthEquity.

Completing the Employer Setup Form

Employer setup forms are specific to each vendor and must be completed and returned with the BPS to elect new integration functionality. Once received, we will process the form and send it to the vendor. The vendor will reach out to the contact provided to complete the plan setup.

Forms are available on Blue Access for Producers℠ (BAP℠) under forms. See appendix for detailed instructions by vendor. Note that BenefitWallet and Flex have two separate forms; one for HSA and a second for FSA/HRA.

If FSA and/or HRA is selected, it is best practice to have all paperwork submitted to us 30 days prior to the effective date to ensure the vendor can generate debit cards, if applicable, prior to the effective date.

Important Note: By completing the Employer Setup Forms and Implementation of a CDH account, the Employer as the Plan Sponsor of a group health benefit plan understands BCBSOK may share the necessary information with the preferred vendor selected for the purposes of plan administration. As a result of the directions to BCBSOK, the preferred vendor will receive information in connection with the group health benefit plan.

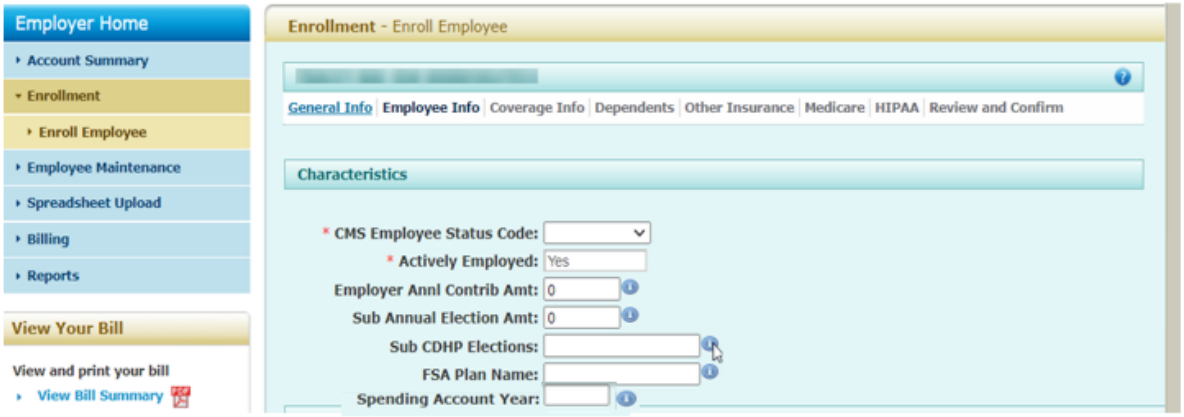
Collecting the Subscriber Enrollment

HSA – all subscribers enrolled in the HSA compatible plan will be sent to the selected vendor.

FSA – FSA elections must be collected and entered in the appropriate enrollment channel. The annual election amount must be entered in whole dollars only, up to the annual IRS limit. If the employer is contributing to the FSA, the total employee and employer election must not exceed the annual maximum.

1. **Paper Enrollment –** A paper Consumer Directed Health Accounts Enrollment and Change Form is available on BAP to aide in collecting election information. Subscribers must complete the form in its entirety to enroll in the FSA. If the employer is offering a Limited Purpose FSA (LPFSA), the appropriate box must be checked. LPFSA is compatible with an HSA. Employer contributions should be communicated directly to the vendor during plan implementation if submitting paper applications.

2. **Blue Access for Employers℠ (BAE℠) Enrollment** – Employers can enter subscriber elections in BAE. On the Employee Info page, hover over the Help Icons for tips on entering characteristic values for each field. See the screenshot below for the fields that can be entered for an employee with an FSA plan.



Characteristics

- **Employer Annual Contribution Amount** – FSA elections only. Optional. Whole number $ amount employer contributes annually. 9 digits with leading zeros. Enter 0 when this field is no longer applicable.
    - **Example**: if employer contribution amount is $500.00, the field should be entered as "000000500"
- **Subscriber Annual Election Amount** – FSA elections only. Required. Whole number $ amount subscriber contributes annually. 9 digits with leading zeros. Enter 0 when this field is no longer applicable.
    - **Example**: If subscriber is electing $1000.00 for their FSA the field should be entered as "000001000"
- **Subscriber CDHP Election** – Comma delimited values reflecting the subscriber's elections. Enter NA if all prior elections are no longer applicable. Required.
    - **Example 1:** If subscriber is electing the FSA, the field should be entered as **"**FSA"
    - **Example 2:** If the subscriber is electing both and HRA and FSA, the field should be entered as "HRA,FSA"
- **FSA Plan Name** – FSA elections only. Required. Enter FSA for full purpose and LPFSA for limited purpose. Enter NA when this field is no longer applicable.
    - **Example 1**: "FSA" (Full Purpose FSA)
    - **Example 2**: "LPFSA" (Limited Purpose FSA)
- **Spending Account Year** – Required for FSA and HRA elections. 4-digit year code. Entry of 4-digit year ***prior*** to the year listed as the Group's anniversary date / renewal date shown on the BAE Employer Home Page (located in the top right corner of BAE Employer Home Page). Enter NA if subscriber is disenrolling.
    - **Example 1**: If Group Renewal Date is 9/1/**2024**, then SAYEAR is **2023**
    - **Example 2:** If Group Renewal Date is 1/1/**2025**, then SAYEAR is **2024**
    - **Example 3:** If Group Renewal Date is 7/1/**2025**, then SAYEAR is **2024**

    Note: The Group's renewal date advances forward a year in BAE when an existing Group renews.

Important Note: Spending Account Year (SAYEAR) is a unique subscriber characteristic that indicates subscriber-level election amounts for CDH Accounts. To ensure BCBSOK is sending the correct election data to the preferred vendor, the SAYEAR must be updated each plan year by advancing one year (based on the anniversary / renewal date).

Additional Notes:

- BAE can be used to enroll as soon as the account becomes active in BlueSTAR (set up is approved, underwriting approves and releases account in production). This generally occurs prior to the Open Enrollment period.
- Time available to retroactively edit accounts in BAE is 90 days for ASO and 31 days for fully insured.

3. **Electronic Enrollment** – If using an external electronic enrollment platform and the employer wants us to send the FSA enrollment, the enrollment vendor must pass the following required subscriber election data:
    - **Employer Annual Contribution Amount** – FSA elections only. Optional. Whole number $ amount employer contributes annually. 9 digits with leading zeros. Enter 0 when this field is no longer applicable.
        - **Example**: if employer contribution amount is $500.00, the field should be entered as "000000500"
    - **Subscriber Annual Election Amount** – FSA elections only. Required. Whole number $ amount subscriber contributes annually. 9 digits with leading zeros. Enter 0 when this field is no longer applicable.
        - **Example**: If subscriber is electing $1000.00 for their FSA the field should be entered as "000001000"
    - **Subscriber CDHP Election** – Comma delimited values reflecting the subscriber's elections. Enter NA if all prior elections are no longer applicable. Required.
        - **Example 1:** If subscriber is electing the FSA, the field should be entered as **"**FSA"
        - **Example 2:** If the subscriber is electing both and HRA and FSA, the field should be entered as "HRA,FSA"
    - **FSA Plan Name** – FSA elections only. Required. Enter FSA for full purpose and LPFSA for limited purpose. Enter NA when this field is no longer applicable.
        - **Example 1**: "FSA" (Full Purpose FSA)
        - **Example 2**: "LPFSA" (Limited Purpose FSA)
    - **Spending Account Year** – Required for FSA and HRA elections. 4-digit year code. 4-digit SAYEAR should be **one year prior** to the Group's Anniversary Date (i.e., Renewal Date) 4-digit year ***regardless*** of when a member is added to the plan. Enter NA or leave blank when disenrolling.

      Important Note: Spending Account Year (SAYEAR) is a unique subscriber characteristic that indicates subscriber-level election amounts for CDH Accounts. To ensure BCBSOK is sending the correct election data to the preferred vendor, the SAYEAR must be updated each plan year by advancing one year (based on the anniversary / renewal date). See below for instructions for how to properly code SAYEAR.

        - Ex. 1 (New Groups with 1/1 Start and *therefore* 1/1 Anniversary / Renewal)
            - Group Start Date: 1/1/2024; Group Renewal: 1/1/**2025;** SAYEAR = **2024**

- Member Hired/Added to Plan 3/1/2024; SAYEAR = **2024**
- Member Hired/Added to Plan 8/1/2024; SAYEAR = **2024**

- Ex. 2 (New Groups with Mid-year start and *therefore* Mid-year Anniversary/Renewal)
  - Group Start Date: 6/1/2024; Group Renewal: 6/1/**2025**; SAYEAR = 2024
  - Member Hired/Added to Plan 9/1/2024; SAYEAR = 2024
  - Member Hired/Added to Plan 2/1/2025; SAYEAR = 2024

- Example 3 (Existing Group with a 1/1 Anniversary / Renewal)
  - Group Renewal Date: 1/1/**2025**; SAYEAR **= 2024**
  - Member Hired/Added to Plan 6/1/2024; SAYEAR = **2024**
  - Member Hired/Added to Plan 8/1/2024; SAYEAR = **2024**

- Example 4 (Existing Group with Mid-year Anniversary / Renewal)
  - Group Renewal Date: 7/1/**2025**; SAYEAR = 2024
  - Member Hired/Added to Plan 8/1/2024; SAYEAR = 2024
  - Member Hired/Added to Plan 1/1/2025; SAYEAR = 2024

Note: The Group's Anniversary Date (renewal date) advances forward a year in BAE when an existing Group renews.

We cannot send enrollment for Dependent Care FSA or Commuter/Transit FSA. We also cannot send FSA or LPFSA for any employee not enrolled in our health plan.

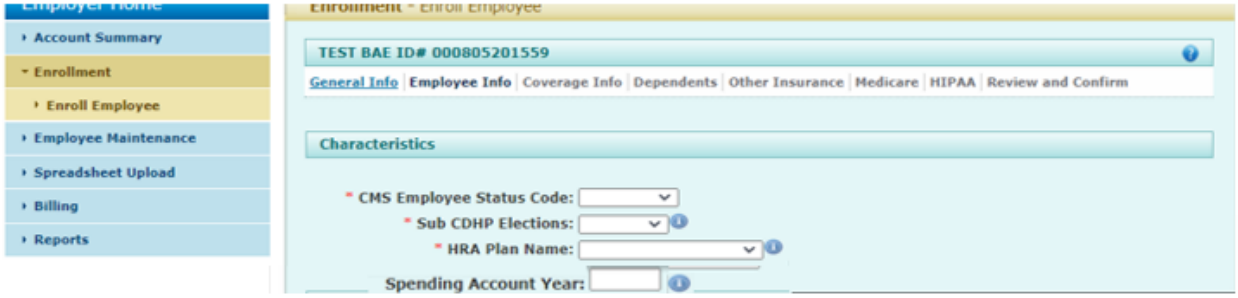
HRA – Employees must enroll in the HRA if offered by the employer. If more than on HRA plan design is offered, please work with the vendor to determine which plan design corresponds to HRA1, HRA2 or HRA3.

1. Paper Enrollment

Spending Account Election (Check all that apply)		
☐ Health Reimbursement Arrangement	☐ Flexible Spending Account	
Health Reimbursement Arrangement Details (Fill out only if you have selected Health Reimbursement Account above)		
☐ HRA1	☐ HRA2	☐ HRA3
Flexible Spending Account Details (Fill out only if you have selected Flexible Spending Account above)		
Flexible Spending Account Plan Code (Check one box below)		
☐ FSA	☐ Limited Purpose FSA (LPFSA)*	
Annual Election Amount** (Fill in dollar amount to the right, up to annual limit in whole dollars only.)	$	.00

Note there are two forms available, one for Small Group and one for Mid-Market / Large Group. The Small Group form does not have the HRA election. Note for HSA's, all subscribers enrolled in the HSA compatible plan will be sent to the selected vendor.

2. **Blue Access for Employers Enrollment** – Employers can enter subscriber elections in BAE. On the Employee Info page, hover over the Help Icons for tips on entering characteristic values for each field. See the screenshot below for the fields that can be entered for an employee with an HRA plan.
Characteristics



- **Subscriber CDHP Election** – Comma delimited values reflecting the subscriber's elections. Enter NA if all prior elections are no longer applicable. Required.
    - **Example 1:** If subscriber is electing the HRA, the field should be entered as "HRA"
    - **Example 2:** If the subscriber is electing both and HRA and FSA, the field should be entered as "HRA,FSA"
- **HRA Plan Name** (which HRA plan has been selected) – HRA Plan Option 1 (HRA1), HRA Plan Option 2 (HRA2) or HRA Plan Option 3 (HRA3) as defined and offered by the Employer and Vendor
- **Spending Account Year** – Required for FSA and HRA elections. 4-digit year code. Entry of 4-digit year ***prior*** to the year listed as the Group's renewal date shown on the BAE Employer Home Page (located in the top right corner of BAE Employer Home Page). Enter NA if member is disenrolling.
    a. **Example 1**: If Group Renewal Date is 9/1/**2024**, then SAYEAR is **2023**
    b. **Example 2:** If Group Renewal Date is 1/1/**2025**, then SAYEAR is **2024**
    c. **Example 3:** If Group Renewal Date is 7/1/**2025**, then SAYEAR is **2024**

    Note: The Group's renewal date advances forward a year in BAE when an existing Group renews

    Important Note: Spending Account Year (SAYEAR) is a unique subscriber characteristic that indicates subscriber-level election amounts for CDH Accounts. To ensure BCBSOK is sending the correct election data to the preferred vendor, the SAYEAR must be updated each plan year by advancing one year (based on the anniversary / renewal date).

Additional Notes:

- BAE can be used to enroll as soon as the account becomes active in BlueSTAR (set up is approved, underwriting approves and releases account in production). This generally occurs prior to the Open Enrollment period.
- Time available to retroactively edit accounts in BAE is 90 days for ASO and 31 days for fully insured.

3. **Electronic Enrollment** – If using an external electronic enrollment platform and the employer wants us to send the HRA enrollment, the enrollment vendor must pass the following required subscriber election data:
    - **Subscriber CDHP Election** – Comma delimited values reflecting the subscriber's elections. Enter NA if all prior elections are no longer applicable. Required.

- **Example 1:** If subscriber is electing the HRA, the field should be entered as "HRA"
- **Example 2:** If the subscriber is electing both and HRA and FSA, the field should be entered as "HRA,FSA"

- **HRA Plan Name** (which HRA plan has been selected) – HRA Plan Option 1 (HRA1), HRA Plan Option 2 (HRA2) or HRA Plan Option 3 (HRA3) as defined and offered by the Employer and Vendor
- **Spending Account Year** – Required for FSA and HRA elections. 4-digit year code. Entry of 4-digit year ***prior*** to the year listed as the Group's renewal date shown on the BAE Employer Home Page (located in the top right corner of BAE Employer Home Page). Enter NA if member is disenrolling.

  Important Note: Spending Account Year (SAYEAR) is a subscriber-level characteristic. SAYEAR is a unique subscriber characteristic that indicates subscriber-level election amounts for CDH Accounts. Because of this, SAYEAR must be updated and submitted each year to ensure BCBSOK is sending the correct election data to the preferred vendor. See below for instructions for how to properly code SAYEAR.

  - Ex. 1 (New Groups with 1/1 Start and *therefore* 1/1 Anniversary / Renewal)
    - Group Start Date: 1/1/2024; Group Renewal: 1/1/**2025;** SAYEAR = **2024**
    - Member Hired/Added to Plan 3/1/2024; SAYEAR = **2024**
    - Member Hired/Added to Plan 8/1/2024; SAYEAR = **2024**

  - Ex. 2 (New Groups with Mid-year start and *therefore* Mid-year Anniversary/Renewal)
    - Group Start Date: 6/1/2024; Group Renewal: 6/1/**2025**; SAYEAR = **2024**
    - Member Hired/Added to Plan 9/1/2024; SAYEAR = **2024**
    - Member Hired/Added to Plan 2/1/2025; SAYEAR = **2024**

  - Example 3 (Existing Group with a 1/1 Anniversary / Renewal)
    - Group Renewal Date: 1/1/**2025**; SAYEAR **= 2024**
    - Member Hired/Added to Plan 6/1/2024; SAYEAR = **2024**
    - Member Hired/Added to Plan 8/1/2024; SAYEAR = **2024**

  - Example 4 (Existing Group with Mid-year Anniversary / Renewal)
    - Group Renewal Date: 7/1/**2025**; SAYEAR = **2024**
    - Member Hired/Added to Plan 8/1/2024; SAYEAR = **2024**
    - Member Hired/Added to Plan 1/1/2025; SAYEAR = **2024**

  Note: The Group's Anniversary Date (renewal date) advances forward a year in BAE when an existing Group renews.

If more than one HRA plan design is offered, please work with the vendor to determine the plan name.

Ongoing Maintenance

FSA elections must be made on an annual basis during open enrollment. Changes to the election amount can only occur during open enrollment unless a status change occurs, which includes marriage, divorce, birth, adoption, death, or change of employment by spouse.

1. **Paper Enrollment** – If a subscriber continues to elect our medical insurance coverage, but wishes to discontinue the FSA plan, the subscriber must be canceled from the FSA plan. To disenroll from coverage, "Open Enrollment Cancel" should be selected on the Enrollment and Change Form. If a

subscriber has rollover funds available for the next plan year but does not wish to elect to contribute for the new plan year, a $0 election should be made.

2. **Blue Access for Employers Enrollment** – The View/Update Employee feature enables employers to select and view employee. If a subscriber continues to elect our medical insurance coverage, but wishes to discontinue the FSA plan, the subscriber must be canceled from the FSA plan.

   Characteristics

   - Employer Annual Contribution Amount – Optional. Whole number $ annual amount. 9 digits with leading zeros. Enter 0 when this field is no longer applicable (i.e., 0)
   - Subscriber Annual Election Amount – Required annually. Required. Whole number $ amount subscriber contributes annually. 9 digits with leading zeros. Enter 0 when this field is no longer applicable.
     - Example: If a subscriber has rollover funds available for the next plan year but does not wish to elect to contribute for the new plan year, 0 should be entered in this field.
   - Subscriber CDHP Election – Required annually. Enter NA if all prior elections are no longer applicable.
   - FSA Plan Name – Required annually. Enter NA when this field is no longer applicable.
   - HRA Plan Name – Required annually. Enter NA when this field is no longer applicable.
   - Spending Account Year – Required annually. Enter NA when this field is no longer applicable.

   Important Note: Spending Account Year (SAYEAR) is a subscriber-level characteristic. SAYEAR is a unique subscriber characteristic that indicates subscriber-level election amounts for CDH Accounts. Because of this, SAYEAR must be updated and submitted each year to ensure BCBSOK is sending the correct election data to the preferred vendor.

3. **Electronic Enrollment** – If a subscriber continues to elect our medical insurance coverage, but wishes to discontinue the FSA plan, the subscriber must be canceled from the FSA plan. If disenrolling from coverage and using an electronic file, "NA" should be indicated in the FSAPNM field **and** the SAYEAR field. If a subscriber has rollover funds available for the next plan year but does not wish to elect to contribute for the new plan year, a $0 election should be made.

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If a subscriber terminates medical coverage, their FSA and HRA will also terminate. Employers should work directly with the vendor if offering continuation of FSA or HRA benefits after termination. HSA funds will remain with the employee upon termination.

Appendix

BenefitWallet® Note

BenefitWallet should no longer be selected to administer any CDH Accounts due to selling their assets to HealthEquity.

Selecting Flexible Benefit Service LLC (Flex®)

Flex has a Set-up Form for HSA and a separate Set-up Form for FSA and HRA. Both forms are required if the client is selecting Flex as the HSA and FSA or HRA vendor.

HSA with Flex

1. Download and Complete Flex's Health Savings Account (HSA) Employer Set-up Form from BAP℠.
    a. Enter Health Plan Name, (BCBSOK) and Broker Information.
    b. For new to Blue sales, Health Plan Customer ID, Account Executive/Account Manager name, email and phone number can be left blank.
    c. Complete the General Employer Information section of the form.
    d. Indicate the High Deductible Health Plan Effective Date, the number of eligible employees and the expected number of HSAs on page 2.
    e. Answer questions 1-3 related to maintenance fees and employer/employee contributions if known.
2. Select Flex as the HSA vendor on from the dropdown menu on the BPA.
3. Return forms when submitting the new sale or account renewal paperwork as normal.

We will process the forms and send the Setup Form to Flex who will reach out to the contact provided to complete the plan setup. We will send all subscribers enrolled in the selected HSA plan to Flex.

FSA with Flex

1. Download and complete the Flex Plans Employer Set-Up Form from BAP.
    a. Select FSA in Section 1: Requested Flex Plans.
    b. For new to Blue sales, Health Plan Account Executive name, email, and phone number can be left blank.
    c. Complete the rest of the form.
2. Select Flex as the FSA vendor on from the dropdown menu on the BPA.
3. Return forms when submitting the new sale or account renewal paperwork as normal.

We will process the forms and send the Flex Plans Employer Set-up Form to Flex who will reach out to the contact provided to complete the plan setup. It is best practice to have all paperwork submitted to us 30 days prior to the effective date to ensure the vendor can generate debit cards, if applicable, prior to the effective date. We will **not** send enrollment and the employer will be responsible for sending FSA enrollment to Flex.

HRA with Flex

Note: HRA is not available to Small Group or Blue Balanced Funded℠

It is important to confirm the plan design with the vendor before committing to a client.

1. Download and complete the Flex Plans Employer Set-Up Form from BAP.
    a. Select HRA in Section 1: Requested Flex Plans.
    b. For new to Blue sales, Health Plan Account Executive name, email, and phone number can be left blank.
    c. Complete the rest of the form.
2. Select Flex as the HRA vendor on the from the dropdown menu on the BPA.
3. Return forms when submitting the new sale or account level renewal paperwork as normal.

We will process the forms and send the Flex Plans Employer Set-up Form to Flex who will reach out to the contact provided to complete the plan setup. It is best practice to have all paperwork submitted to us 30 days prior to the effective date to ensure the vendor can generate debit cards, if applicable, prior to the effective date. We will **not** send enrollment and the employer will be responsible for sending HRA enrollment to Flex.

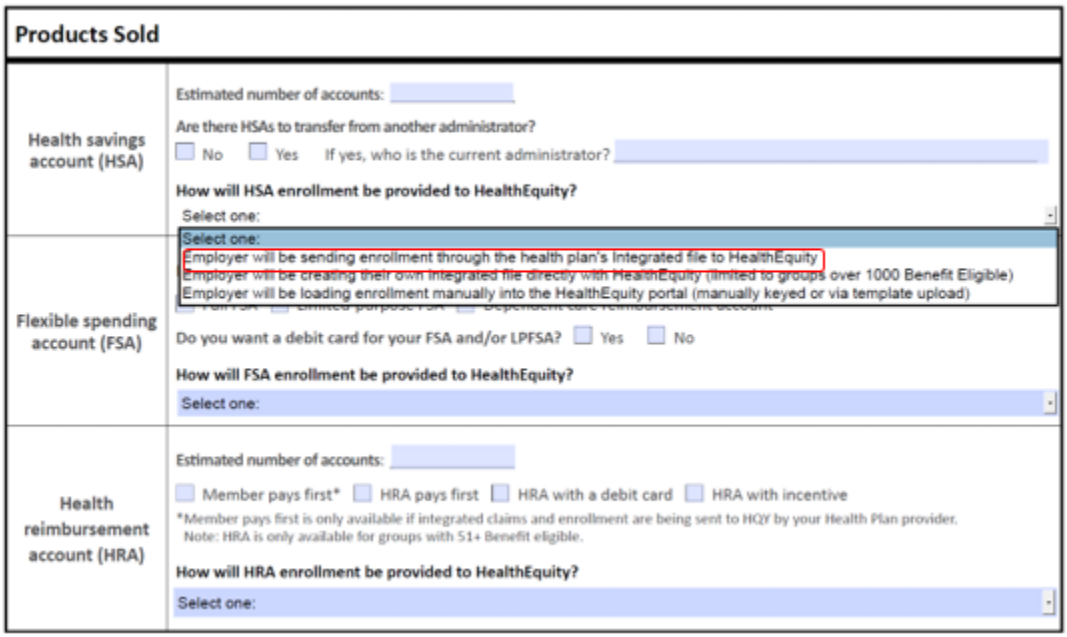
Selecting HealthEquity®

HSA with HealthEquity

For existing HealthEquity clients wishing to have the integration features, please contact HealthEquity directly to determine if eligibility should continue in existing state or through the health plan.

SCENARIO 1: New to HealthEquity clients or existing HealthEquity clients wishing to have the health plan send the eligibility, complete the below steps:

1. Download and complete HealthEquity's New Business Notification / Setup Form from BAP℠.
    a. Complete the New Business Information and Implementation Call Information sections of the form on page 1.
        i. For new to Blue sales, BCBS Account Executive can be left blank.
    b. Under Products Sold on page 2:
        i. Enter the estimated number of accounts.
        ii. Answer questions related to HSAs being transferred from another vendor if applicable.
        iii. Select "Employer will be sending enrollment through the health plan's Integrated file" from the dropdown menu in response to the question of how the HSA enrollments will be sent to HealthEquity.
        iv. Indicate existing HealthEquity client in the comments section if applicable.



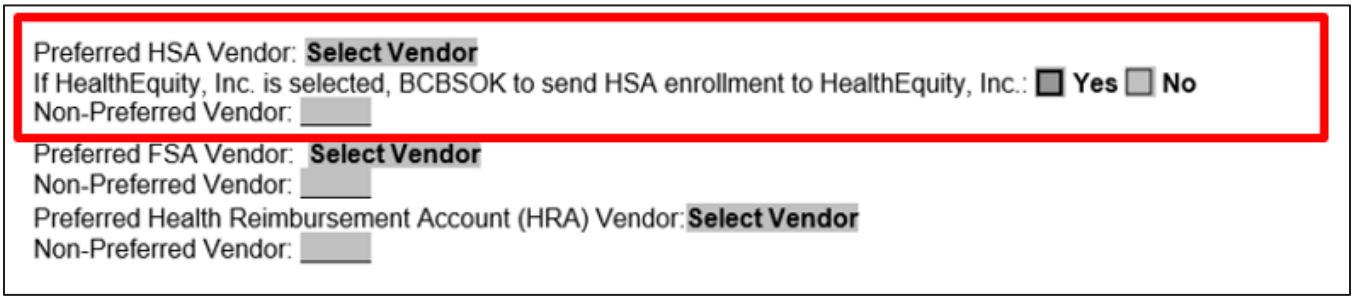
Example of HealthEquity's New Business Notification / Setup Form and how to select that the employer will be sending enrollments through the health plan's integrated file to HealthEquity.

2. Select HealthEquity as the Preferred HSA Vendor on the BPA and select "**Yes**" for BCBSOK to send HSA Enrollments to HealthEquity, Inc.



Oklahoma Small Group BPA - if BCBSOK is sending enrollment:

- Preferred HSA Vendor: **HealthEquity**
- BCBSOK to send HSA enrollment to HealthEquity**: Yes**



Oklahoma Mid-Market BPA - if BCBSOK is sending enrollment:

- Preferred HSA Vendor, from the dropdown: **HealthEquity**
- BCBSOK to send HSA enrollment to HealthEquity**: Yes**

3. Return forms when submitting the new sale or account level renewal paperwork as normal.

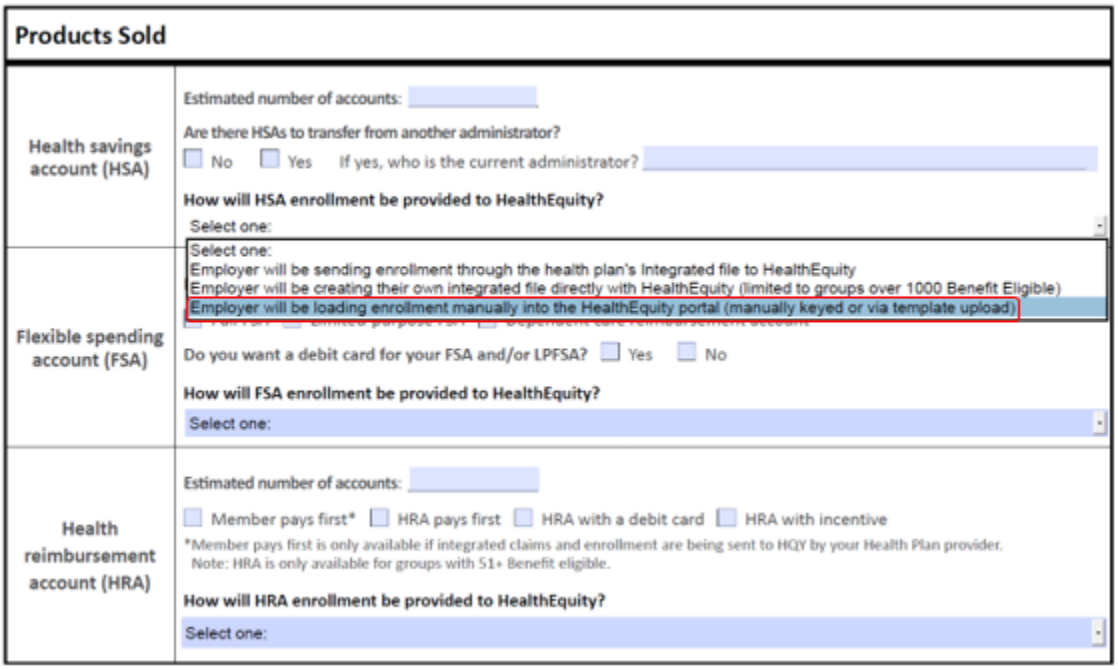
We will process the forms and send the New Business Notification / Setup Form to HealthEquity who will reach out to the contact provided to complete the plan setup. We will send all subscribers enrolled in the selected HSA plan to HealthEquity.

SCENARIO 2: Existing HealthEquity clients wishing to continue sending enrollments in current state and not through the health plan, complete the below steps:

1. Download and complete HealthEquity's New Business Notification / Setup Form from BAP.
    a. Complete the New Business Information and Implementation Call information sections of the form. (Note there will not be an implementation call from HealthEquity because it is an existing client.)
        i. For new to Blue sales, BCBS Account Executive can be left blank.
    b. Under Products Sold on page 2:
        i. Enter the estimated number of accounts.

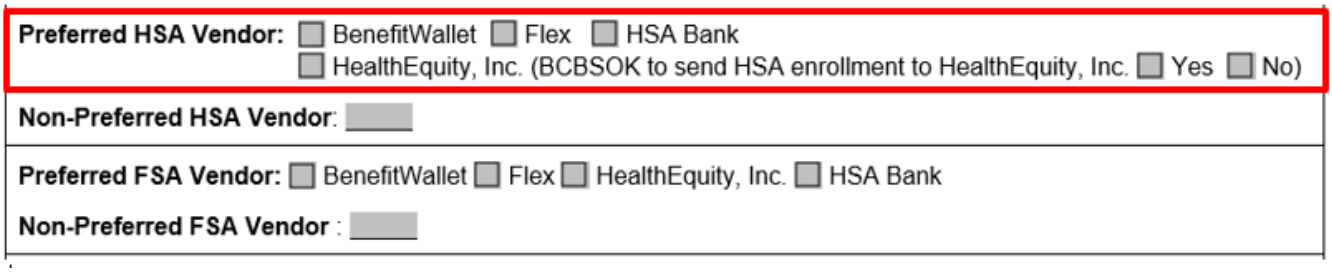
ii. Select “Employer will be loading enrollment manually into the HealthEquity portal (manually keyed or via template upload)” from the dropdown in response to the question of how the HSA enrollments will be sent to HealthEquity.

iii. Indicate existing HealthEquity client in the comments section.



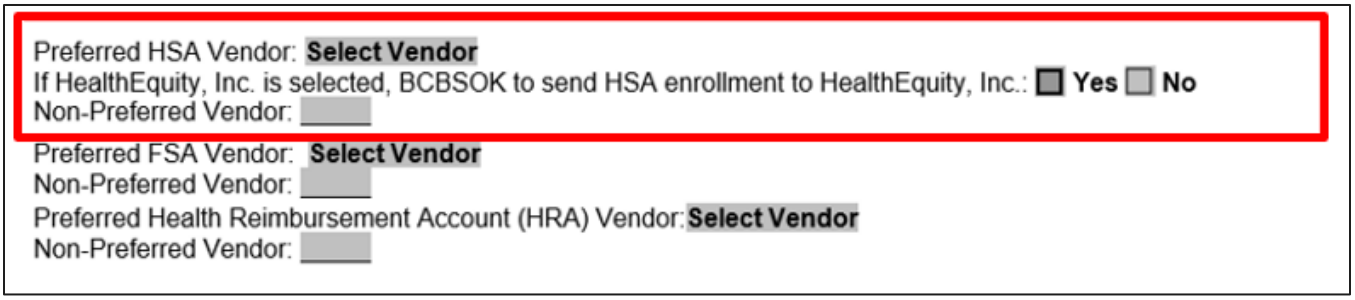
Example of HealthEquity’s New Business Notification / Setup Form and how to select that the employer will be sending enrollments directly to HealthEquity.

2. **IMPORTANT:** On the BPA select HealthEquity as the Preferred HSA vendor and select “NO” for BCBSOK to send HSA Enrollments to HealthEquity, Inc.



Oklahoma Small Group BPA - if client is sending enrollment:

- Preferred HSA Vendor: **HealthEquity**
- BCBSOK to send HSA enrollment to HealthEquity**: No**



Oklahoma Mid-Market BPA - if client is sending enrollment:

- Preferred HSA Vendor, from the dropdown: **HealthEquity**
- BCBSOK to send HSA enrollment to HealthEquity**: No**

3. Return forms when submitting the new sale or account level renewal paperwork as normal.

We will process the forms and send the New Business Notification / Setup Form to HealthEquity who will set up the other integration features on their end. We will **not** send HSA eligibility to HealthEquity.

FSA with HealthEquity

FSA integration is available to HealthEquity new business only due to their various platforms. For existing HealthEquity clients, please contact HealthEquity directly to determine if migration can occur.

1. Download and complete HealthEquity's New Business Notification / Setup Form from BAP.
    a. Complete the New Business Information and Implementation Call information sections of the form.
        i. For new to Blue sales, BCBS Account Executive can be left blank.
    b. Under Products Sold on page 2:
        i. Enter the estimated number of accounts.
        ii. Select the type of FSA's offered.
        iii. Select "Employer will be sending enrollment through the health plan's Integrated file" from the dropdown in response to the question of how the FSA enrollments will be sent to HealthEquity unless there is an enrollment exception (see the Appendix for a list of exceptions).
2. Select HealthEquity as the FSA vendor on from the dropdown menu on the BPA.
3. Collect subscriber FSA elections through Consumer Directed Health Accounts Enrollment and Change Form or electronically unless there is an enrollment exception (see the appendix for a list of exceptions).
4. Return forms when submitting the new sale or account renewal paperwork as normal.

We will process the forms and send the New Business Notification / Setup Form to HealthEquity who will reach out to the contact provided to complete the plan setup. It is best practice to have all paperwork submitted to us 30 days prior to the effective date to ensure the vendor can generate debit cards, if applicable, prior to the effective date. We will send enrollment for Health Care FSA's and Limited Purpose FSA's if election information is provided.

HRA with HealthEquity:

Note: HRA is not available to Small Group or Blue Balanced Funded℠

It is important to confirm the plan design with the vendor before committing to a client.

HRA integration is available to HealthEquity new business only due to their various platforms. For existing HealthEquity clients, please contact HealthEquity directly to determine if migration can occur.

1. Download and complete HealthEquity's New Business Notification / Setup Form from BAP.
    a. Complete the New Business Information and Implementation Call information sections of the form.
        i. For new to Blue sales, BCBS Account Executive can be left blank.
    b. Under Products Sold on page 2:
        i. Enter the estimated number of accounts.
        ii. Select basic plan design.
        iii. Select "Employer will be sending enrollment through the health plan's Integrated file" from the dropdown in response to the question of how the HRA enrollments will be sent to HealthEquity unless there is an enrollment exception (see the Appendix for a list of exceptions).
2. Select HealthEquity as the HRA vendor on from the dropdown menu on the BPA.
3. Collect subscriber HRA elections through Consumer Directed Health Accounts Enrollment and Change Form or electronically unless there is an Enrollment Exception (see the appendix for a list of exceptions). If more than on HRA plan design is offered, please work with the vendor to determine which plan design corresponds to HRA1, HRA2 or HRA3.
4. Return forms when submitting the new sale or account renewal paperwork as normal.

We will process the forms and send the New Business Notification / Setup Form to HealthEquity who will reach out to the contact provided to complete the plan setup. It is best practice to have all paperwork submitted to us 30 days prior to the effective date to ensure the vendor can generate debit cards, if applicable, prior to the effective date. We will send enrollment for HRA if election information is provided.

Selecting HSA Bank®

HSA with HSA Bank

1. Download and complete all required fields of HSA Bank's Employer Discovery Setup Form from BAP℠.
    a. Complete the Account Information and General Employer Information sections of the form.
        i. For new to Blue sales, Account Executive/Account Manager name, email and phone number can be left blank.
        ii. It is important that the Employer Federal Tax ID/EIN provided to both BCBSOK and HSA Bank match for all integration features to function. Any changes to the Employer Federal Tax ID/EIN must be updated with both BCBSOK and HSA Bank.
        iii. Enter the approximate number of Benefit Eligible Employees if exact numbers are not known.
    b. Under Setup Preferences:
        i. Select products offered through HSA Bank.
        ii. Indicate whether the Employer or Employee will pay the account maintenance fees. If the employer is paying the maintenance fees, the Financial Institution Information and Authorization Agreement for Direct Payments (ACH Debits) sections must be completed.
        iii. Check the box to utilize integrated enrollment file.
    c. Complete Key Implementation Dates and Benefit Consultant/Broker Information sections on page 2.
2. Select HSA Bank as the HSA vendor on from the dropdown menu on the BPA.
3. Return forms when submitting the new sale or account renewal paperwork as normal.

We will process the forms and send the Employer Discovery Setup Form to HSA Bank who will reach out to the contact provided to complete the plan setup. We will send all subscribers enrolled in the selected HSA plan to HSA Bank.

FSA with HSA Bank

1. Download and complete all required fields of HSA Bank's Employer Discovery Setup Form from BAP.
    a. Complete the Account Information and General Employer Information sections of the form.
        i. For new to Blue sales, Account Executive/Account Manager name, email and phone number can be left blank.
        ii. It is important that the Employer Federal Tax ID/EIN provided to both BCBSOK and HSA Bank match for all integration features to function. Any changes to the Employer Federal Tax ID/EIN must be updated with both BCBSOK and HSA Bank.
        iii. Enter the approximate number of Benefit Eligible Employees if exact numbers are not known.
    b. Under Setup Preferences:
        i. Select products offered through HSA Bank.
        ii. Check the box to utilize integrated enrollment file unless there is an enrollment exception (see the appendix for a list of exceptions).
    c. Complete Key Implementation Dates and Benefit Consultant/Broker Information sections on page 2.

2. Select HSA Bank as the FSA vendor on from the dropdown menu on the BPA.
3. Collect subscriber FSA elections through Consumer Directed Health Accounts Enrollment and Change Form or electronically unless there is an enrollment exception (see the appendix for a list of exceptions).
4. Return forms when submitting the new sale or account renewal paperwork as normal.

We will process the forms and send the Employer Discovery Setup Form to HSA Bank who will reach out to the contact provided to complete the plan setup. It is best practice to have all paperwork submitted to us 30 days prior to the effective date to ensure the vendor can generate debit cards, if applicable, prior to the effective date. We will send enrollment for Health Care FSA's and Limited Purpose FSA's if election information is provided.

HRA with HSA Bank:

Note: HRA is not available to Small Group or Blue Balanced Funded.

It is important to confirm the plan design with the vendor before committing to a client.

1. Download and complete all required fields of HSA Bank's Employer Discovery Setup Form from BAP.
    a. Complete the Account Information and General Employer Information sections of the form.
        i. For new to Blue sales, Account Executive/Account Manager name, email and phone number can be left blank.
        ii. It is important that the Employer Federal Tax ID/EIN provided to both BCBSOK and HSA Bank match for all integration features to function. Any changes to the Employer Federal Tax ID/EIN must be updated with both BCBSOK and HSA Bank.
        iii. Enter the approximate number of Benefit Eligible Employees if exact numbers are not known
    b. Under Setup Preferences:
        i. Select products offered through HSA Bank
        ii. Check the box to utilize integrated enrollment file unless there is an enrollment exception (see the appendix for a list of exceptions).
    c. Complete Key Implementation Dates and Benefit Consultant/Broker Information sections on page 2.
2. Select HSA Bank as the HRA vendor on from the dropdown menu on the BPA.
3. Collect subscriber HRA elections through Consumer Directed Health Accounts Enrollment and Change Form or electronically unless there is an enrollment exception (see the appendix for a list of exceptions). If more than on HRA plan design is offered, please work with the vendor to determine which plan design corresponds to HRA1, HRA2 or HRA3.
4. Return forms when submitting the new sale or account renewal paperwork as normal.

We will process the forms and send the Employer Discovery Setup Form to HSA Bank who will reach out to the contact provided to complete the plan setup. It is best practice to have all paperwork submitted to us 30 days prior to the effective date to ensure the vendor can generate debit cards, if applicable, prior to the effective date. We will send enrollment for HRA if election information is provided.

Eligibility Exceptions

We cannot send enrollment data to the employer in the following instances. When you encounter an exception, indicate on the BPA and Employer Setup Forms that the employer will send the enrollment data directly to the vendor.

HSA Exceptions:

- Employer is an existing HealthEquity client. Contact HealthEquity directly to confirm integration availability.

FSA Exceptions:

- The employer offers non-Medical FSA Plans (i.e., Dependent Care, Commuter FSA Plans) in addition to Health Care FSA and wants to send all FSA eligibility data directly to the vendor.
- The client's benefits enrollment vendor cannot send the required fields to us.
- Client does not wish to be migrated to our enrollment process.

HRA Exceptions:

- The employer is offering a non-Medical FSA plan in addition to the HRA and wants to send all eligibility data directly to the vendor. Note some HRA plan designs will require that we send the enrollment. Confirm with the vendor.
- The client's benefits enrollment vendor cannot send the required fields to us.
- Client does not wish to be migrated to our enrollment process.

Exclusions:

- HRA is not available to Small Group or Blue Balanced Funded.
- FSA and HRA with Integration is not available for clients enrolling through Blue Directions, Bentegro, or DocuSign enrollment channels. These clients must enroll using BAE or large groups can use ATL if integration is desired.
- The FSA and HRA plan year must coincide with the health plan year to have integration.
- FSA and HRA integration are not available to HealthEquity existing business due to their various platforms. For existing HealthEquity clients, please contact HealthEquity directly to determine if migration can occur.

Flex and HealthEquity are contracted, independent companies that offer services to support health savings accounts (HSAs), flexible spending accounts (FSAs) and Health Reimbursement Arrangements (HRAs) for Blue Cross and Blue Shield of Oklahoma. They are solely responsible for the products and services that they provide.

HSA Bank, a division of Webster Bank, N.A. is an independent and separate company that will contract with the employer to provide HSAs, FSAs and HRAs. HSA Bank does not offer Blue Products or Services. BCBSOK makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

Health Savings Accounts (HSAs), Flexible Spending Accounts (FSAs) and Health Reimbursement Arrangements (HRAs) may have tax and legal requirements. BCBSOK does not provide legal or tax advice, and nothing in these materials should be construed as legal or tax advice. These materials, and any tax-related statements in them, are not intended or written to be used, and cannot be used or relied on, for the purpose of assessing tax liability or avoiding tax penalties. Tax-related statements, if any, may have been written in connection with the promotion or marketing of the transaction(s) or matter(s) addressed by these materials. You should seek advice based on your particular circumstances from an independent tax advisor regarding the tax consequences of specific health insurance plans or products.