Employer Report Guide

hsabank

A Division of Webster Bank, N.A., Member FDIC

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1 | Report Overview

HSA Bank provides you with a comprehensive set of reports to monitor and manage your program. These reports are designed to provide you with the necessary information for both daily administration as well as overall program management. Use of these reports affords superior transparency into your program, which enables general administration and helps you optimize the program by understanding specific employee behaviors and patterns of use. Please note, some reports may not apply depending on the types of plans you offer. The first five reports in your list (beginning with the Program Summary Report and ending with the HSA All Account Report) are specific to HSAs. All other reports are related to health plans.

2 | Summary of Program Reporting

No.	Report Name	Description	Applicable Plans	Frequency
1	**Program Summary Report**	Provides key summary information on HSA program, including: contribution information, account usage, investment activity, balance ranges, spending/saving habits, and details on distributions.	HSA	Monthly
2	**HSA Account Detail Report (Detail)**	Provides the contribution details for employees who had employer contributions during the requested time period.	HSA	Monthly & On Demand
3	**HSA Account Detail Report (Summary)**	Provides current period and year-to-date employer contributions for current and prior tax year. Also provides employment status, account status, and HDHP coverage level.	HSA	Monthly & On Demand
4	**HSA Plan Funding Collection Notification (If applicable)**	Reflects the funding for recently submitted payroll and employer contributions, and the date the funds will post to employee accounts.	HSA	1 business day prior to funding
5	**HSA All Account Report**	Provides a variety of HSA data to assist with administrative tasks, such as reviewing which accounts can be funded, assisting with employees' questions, and obtaining account numbers to set up direct deposit contributions (if applicable).	HSA	Weekly
6	**Fee Funding Notification *(if applicable)***	Reflects the employer fees assessed for the prior month.	HSA, FSA, HRA, Commuter	Monthly
8	**Account Balance Detail Report**	Provides plan balance summaries and employee account balance detail as of specified date.	FSA, HRA, Commuter	Monthly & On Demand
9	**Enhanced Debit Card Settlement Report**	Provides a summary of the settled debit card transactions that require funding by settlement date.	FSA, HRA, Commuter	On Demand

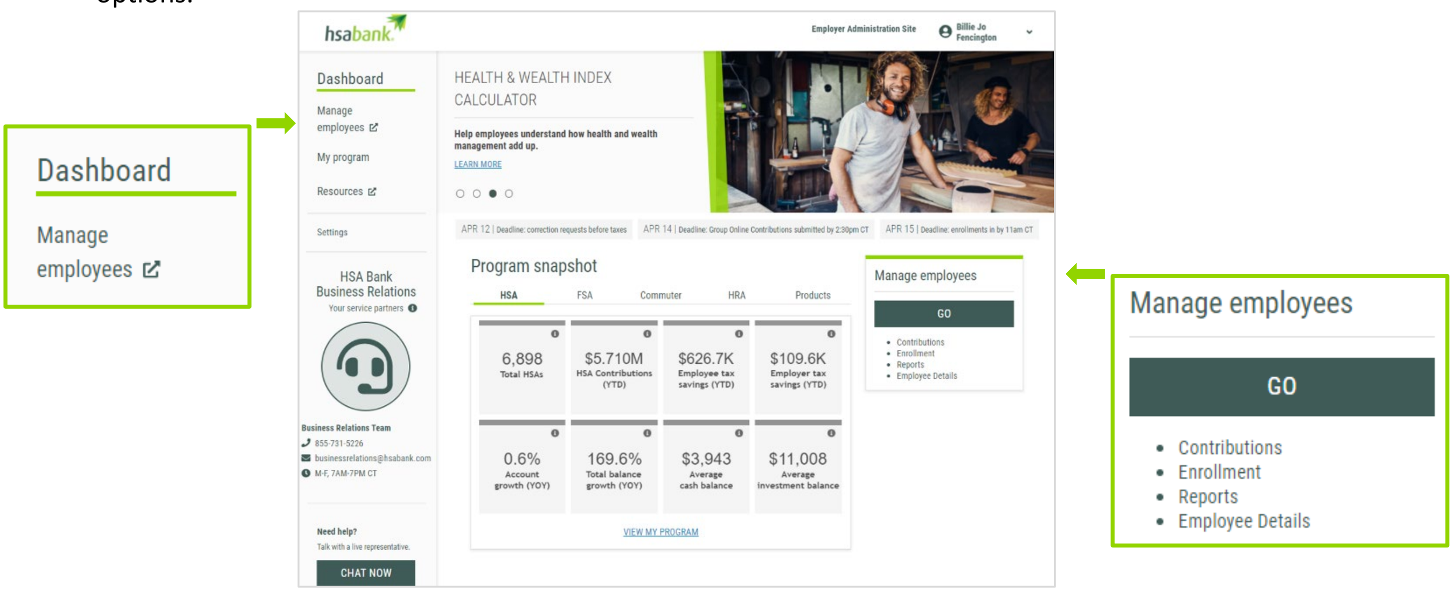
10	**Enrollment Report**	Provides information about enrollments for an employer group by plan and plan year.	HSA, FSA, HRA, Commuter	Monthly & On Demand
11	**Repayments Report**	Provides information about repayments for a specific date range. Assists in the review and audit of repayments for the employer.	FSA, HRA, Commuter	Monthly & On Demand
12	**Employer Funding Notification**	Provides information about funds to be collected from the employer, including funding adjustments.	FSA, HRA, Commuter	1 business day prior to funding
13	**Payroll Deduction Notification**	Provides information on what deductions are scheduled to be made of an upcoming payroll date.	FSA, HRA, Commuter	1 business day prior to payroll date
14	**Account Balance Report**	Similar to the Account Balance Detail Report however this report only contains the consumer information – no summary	FSA, HRA, Commuter	On Demand
15	**Claim History Report**	Provides information on claims submitted during a specified time period, including claim status.	FSA, HRA, Commuter	On Demand
16	**Debit Card Funding Report**	Provides a summary of the debit card transaction amounts and fee amounts by plan.	FSA, HRA, Commuter	On Demand
17	**Debit Card Mail Date Report**	Provides the history of the date(s) cards were mailed to cardholders.	HSA, FSA, HRA, Commuter	On Demand
18	**Debit Card Status Report**	Provides a list of the cards and current card status that have been issued to cardholders.	HSA, FSA, HRA, Commuter	On Demand
19	**Debit Card Transaction Report**	Provides a list of all debit card transactions by settlement date.	FSA, HRA, Commuter	On Demand
20	**Payment History Report**	Provides all reimbursements/payments during a specified time period.	FSA, HRA, Commuter	On Demand
21	**Reimbursement Detail Report**	Provides information on all claims reimbursed during a specified time period.	FSA, HRA, Commuter	On Demand

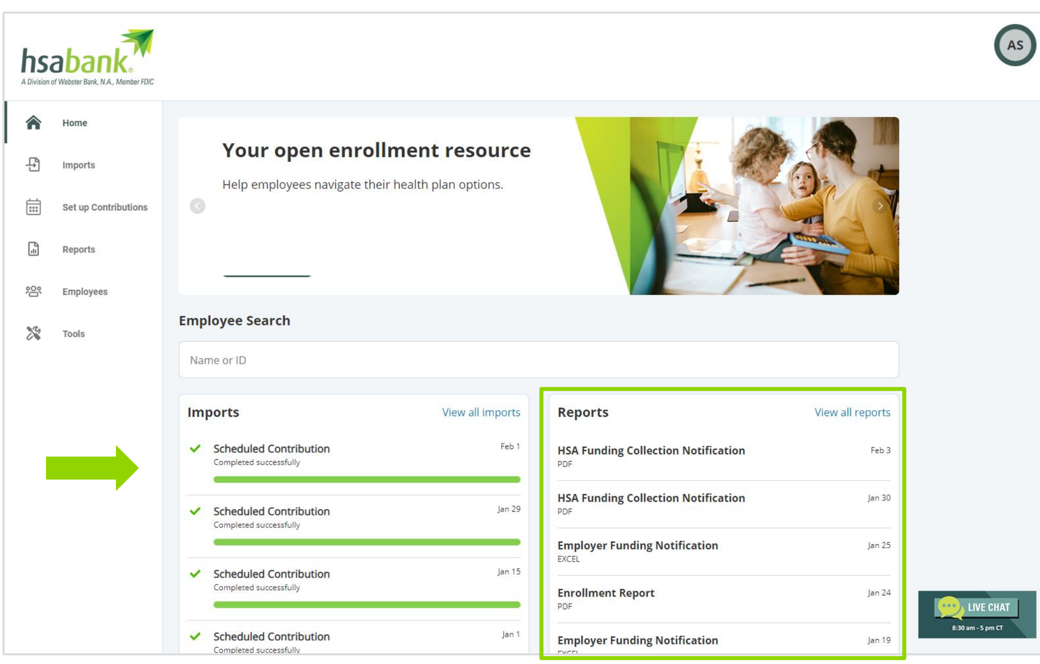
NEW

3 | Accessing Reports

The Employer Administration Site, employer.hsabank.com, provides access to scheduled reports and the ability for you to generate reports on an as-needed basis. Go to Manage employees to view a list of recently created reports. Then go to the **REPORTS** tab for a complete list of reports related to your program.

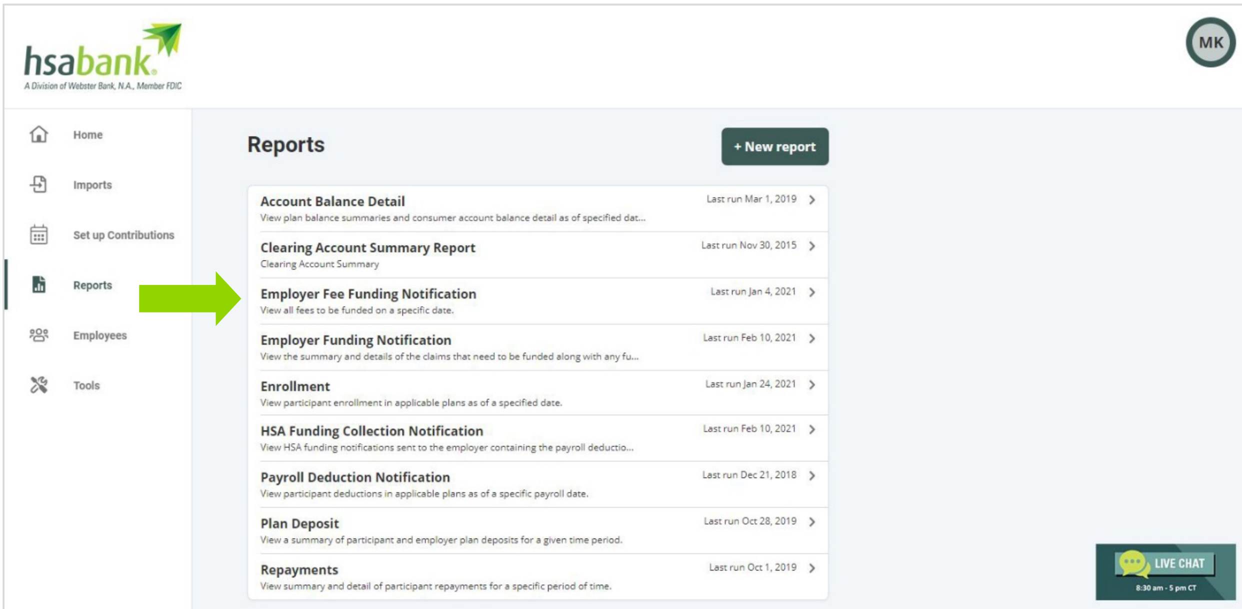
The following pages describe the standard reports available to you. Additional reports are available based on your group's specific needs. Please contact a Business Relations Representative for these options.

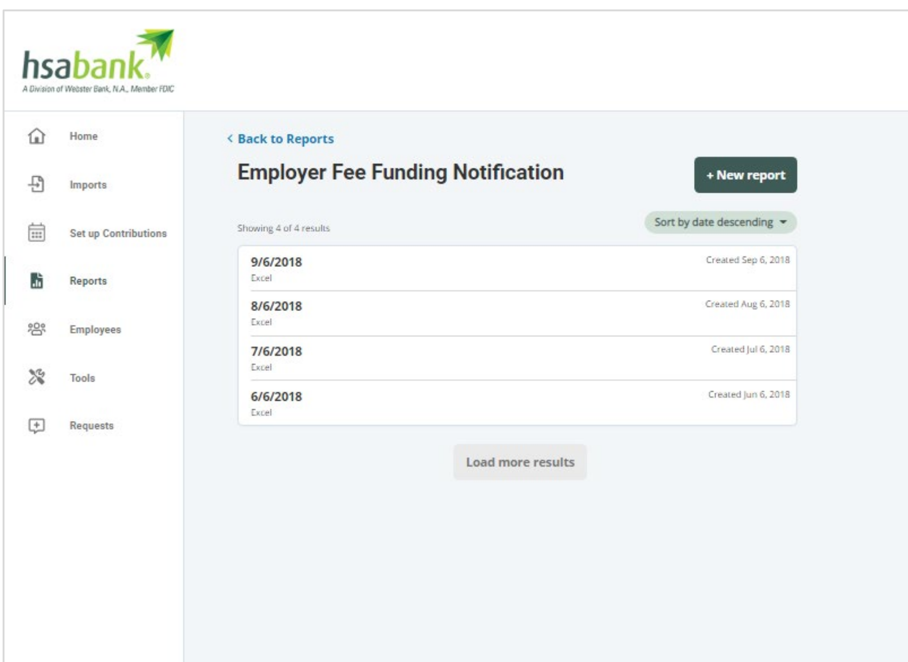




Select and View a Report

Once you've navigated to the **REPORTS** tab, click a report type to view the history of reports that were generated. Simply click the tile of the report you would like to access.

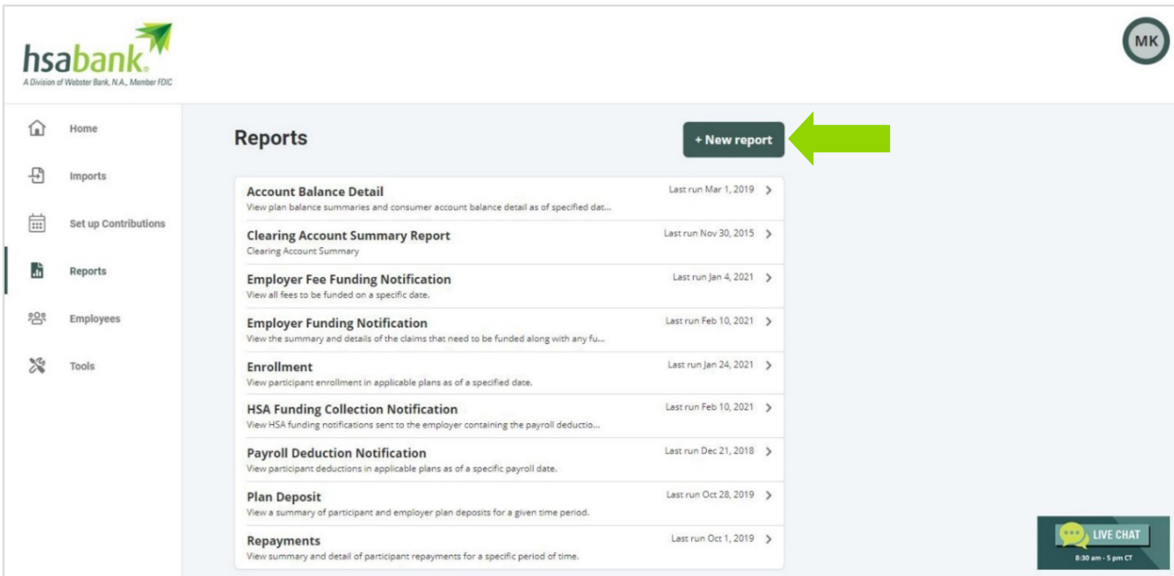


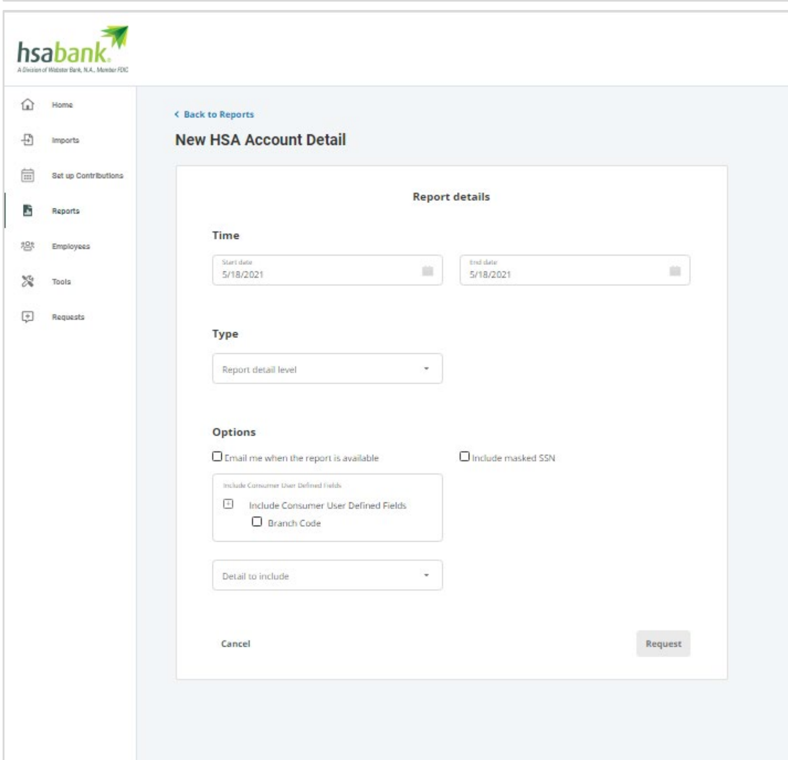


Run a Report

Some of the report types can be generated on an ad hoc basis.

- From the **REPORTS** tab, click the **+ New report** button.
- You can then select your desired report and set the desired parameters, which may include the report format, date, level of detail, and divisions to be included. You can also request to be emailed when your report is available.
- When the report has generated, you can quickly access it under the **Recently Created Reports** section of the **Home Page**.

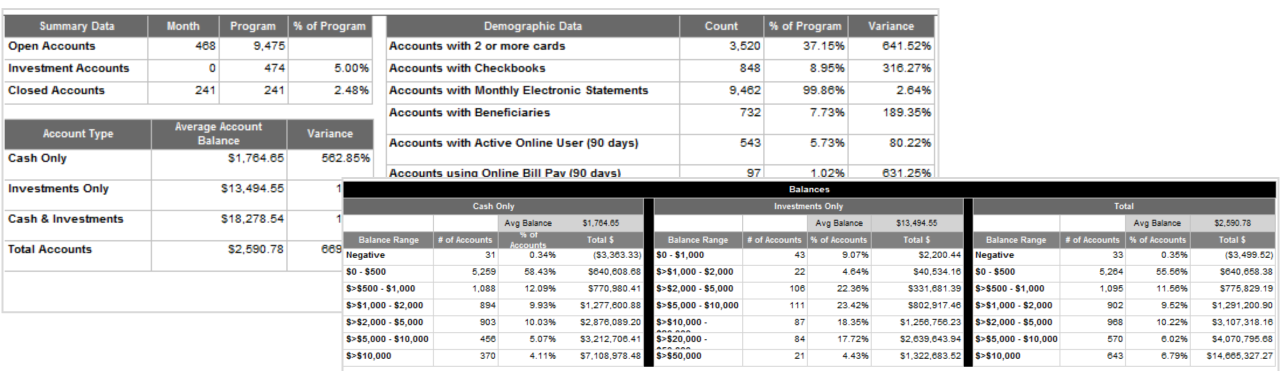




4 | Report Samples

4.1 Program Summary Report

Purpose	Provides key summary details on the HSA program, including: account usage, status, investment activity, balance ranges, spending/saving habits, and details on distributions. The report has three sections (tabs). If you are using location codes, the three sections provide a summary for each location.
When is it available?	Available five business days after the first of the month.
Report Format	Excel



Summary Data	Month	Program	% of Program
Open Accounts	468	9,475	
Investment Accounts	0	474	5.00%
Closed Accounts	241	241	2.48%

Account Type	Average Account Balance	Variance
Cash Only	$1,764.65	562.85%
Investments Only	$13,494.55	1
Cash & Investments	$18,278.54	1
Total Accounts	$2,590.78	669

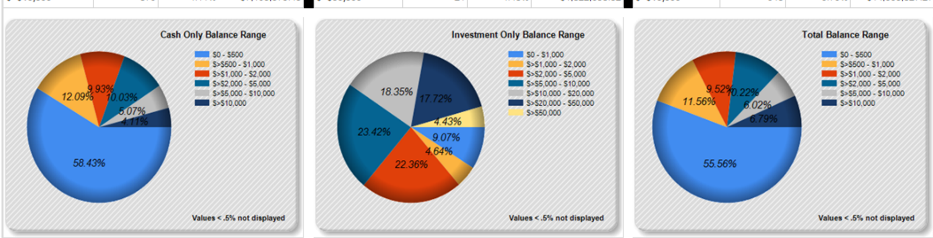
Demographic Data	Count	% of Program	Variance
Accounts with 2 or more cards	3,520	37.15%	641.52%
Accounts with Checkbooks	848	8.95%	316.27%
Accounts with Monthly Electronic Statements	9,462	99.86%	2.64%
Accounts with Beneficiaries	732	7.73%	189.35%
Accounts with Active Online User (90 days)	543	5.73%	80.22%
Accounts using Online Bill Pay (90 days)	97	1.02%	631.25%

Balances

Cash Only			
		Avg Balance	$1,764.65
Balance Range	# of Accounts	% of Accounts	Total $
Negative	31	0.34%	($3,363.33)
$0 - $500	5,259	58.43%	$640,608.68
$>$500 - $1,000	1,088	12.09%	$770,980.41
$>$1,000 - $2,000	894	9.93%	$1,277,600.88
$>$2,000 - $5,000	903	10.03%	$2,876,089.20
$>$5,000 - $10,000	456	5.07%	$3,212,706.41
$>$10,000	370	4.11%	$7,108,978.48

Investments Only			
		Avg Balance	$13,494.55
Balance Range	# of Accounts	% of Accounts	Total $
$0 - $1,000	43	9.07%	$2,200.44
$>$1,000 - $2,000	22	4.64%	$40,534.16
$>$2,000 - $5,000	106	22.36%	$331,681.39
$>$5,000 - $10,000	111	23.42%	$802,917.46
$>$10,000 -	87	18.35%	$1,256,756.23
$>$20,000 -	84	17.72%	$2,639,643.94
$>$50,000	21	4.43%	$1,322,683.52

Total			
		Avg Balance	$2,590.78
Balance Range	# of Accounts	% of Accounts	Total $
Negative	33	0.35%	($3,499.52)
$0 - $500	5,264	55.56%	$640,658.38
$>$500 - $1,000	1,095	11.56%	$775,829.19
$>$1,000 - $2,000	902	9.52%	$1,291,200.90
$>$2,000 - $5,000	968	10.22%	$3,107,318.16
$>$5,000 - $10,000	570	6.02%	$4,070,795.68
$>$10,000	643	6.79%	$14,665,327.27



Key information found in this report:

- Number of accounts and the average balance of the employee accounts
- Where employees use their HSA dollars
- Whether your employees are “spenders” or “savers”
- Employee use of online tools

4.2 HSA Account Detail Report (Detail)

Purpose	Provides the contribution details for employees who had employer contributions during the requested time period. Monthly, auto-generated reports have year-to-date employer contribution details; on-demand reports can be run with year-to-date details or may be limited to a specified reporting period.
When is it available?	Monthly, on demand
Report Format	Excel

Identifier	Last Name	First Name	Amount	Contribution Type	Tax Year	Processed Date	Note
900293XXX1	SAMPLE1	NAME1	$0.01	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX2	SAMPLE2	NAME2	$500.00	Employer Contribution	2015	11/24/2015	11/20/2015 Employer Contribution
900293XXX3	SAMPLE3	NAME3	$138.90	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX4	SAMPLE4	NAME4	$38.12	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX5	SAMPLE5	NAME5	$108.51	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX6	SAMPLE6	NAME6	$108.51	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX7	SAMPLE7	NAME7	$26.93	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX8	SAMPLE8	NAME8	$2.27	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX9	SAMPLE9	NAME9	$108.51	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX10	SAMPLE10	NAME10	$76.92	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX11	SAMPLE11	NAME11	$35.71	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX12	SAMPLE12	NAME12	$38.12	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX13	SAMPLE13	NAME13	$440.73	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX14	SAMPLE14	NAME14	$0.01	Payroll Deduction	2015	11/24/2015	11/20/2015 Payroll Deduction
900293XXX15	SAMPLE15	NAME15	$440.73	Payroll Deduction	2015	11/23/2015	11/19/2015 Payroll Deduction
900293XXX16	SAMPLE16	NAME16	$255.77	Payroll Deduction	2015	11/23/2015	11/19/2015 Payroll Deduction
900293XXX17	SAMPLE17	NAME17	$19.23	Payroll Deduction	2015	11/23/2015	11/19/2015 Payroll Deduction
900293XXX18	SAMPLE18	NAME18	$173.07	Payroll Deduction	2015	11/23/2015	11/19/2015 Payroll Deduction
900293XXX19	SAMPLE19	NAME19	$213.19	Payroll Deduction	2015	11/23/2015	11/19/2015 Payroll Deduction
900293XXX20	SAMPLE20	NAME20	$213.19	Payroll Deduction	2015	11/23/2015	11/19/2015 Payroll Deduction

Key information found in this report:

- List of all employer contributions made to HSAs year-to-date or during a given time period.

4.3 HSA Account Detail Report (Summary)

Purpose	Provides current period and year-to-date employer contributions for current and prior tax year. Also provides an overview of each employee's HSA, including their employment status, account status, and HDHP coverage level.
When is it available?	Monthly, on demand
Report Format	Excel

A	B	C	D	E	F	G	H	I	J	K	L	M
Identifier	Last Name	First Name		Employment Status	Employment Status Effective Date	Account Creation Date	Account Status	IDV	Agreements	Current Period Payroll Deductions	Current Period Employer Contributions	Current Period Total Contributions
9000000109	DOE	JOHN		Active	02/01/2014	03/25/2014	Active	Y	Y	$0.00	$2,000.00	$2,000.00
9000000096	DOE	JANE		Active	02/01/2014	03/25/2014	Inactive	Y	Y	$0.00	$2,000.00	$2,000.00
9000000130	SAMPLE	JANE		Active	02/01/2014	03/25/2014	Inactive	Y	Y	$0.00	$2,000.00	$2,000.00
9000000165	SAMPLE	JOE		Active	02/01/2014	03/25/2014	Active	Y	Y	$0.00	$2,000.00	$2,000.00
9000000173	SMITH	JOHN		Active	02/01/2014	03/25/2014	Active	Y	Y	$0.00	$2,000.00	$2,000.00
9000000741	SMITH	MARY		Active	02/01/2014	03/25/2014	Active	Y	N	$0.00	$0.00	$0.00
9000000768	JOHNSON	JOHN		Active	02/01/2014	03/25/2014	Active	Y	N	$0.00	$0.00	$0.00

N	O	P	Q	R	S	T	U	V
YTD Payroll Deductions	YTD Employer Contributions	YTD Total Contributions	Prior Tax Year YTD Payroll Deductions	Prior Tax Year YTD Employer Contributions	Prior Tax Year YTD Total Contributions	Current Tax Year YTD Payroll Deductions	Current Tax Year YTD Employer Contributions	Current Tax Year YTD Total Contributions
$0.00	$2,000.00	$2,000.00	$0.00	$0.00	$0.00	$0.00	$2,000.00	$2,000.00
$0.00	$2,000.00	$2,000.00	$0.00	$0.00	$0.00	$0.00	$2,000.00	$2,000.00
$0.00	$2,000.00	$2,000.00	$0.00	$0.00	$0.00	$0.00	$2,000.00	$2,000.00
$0.00	$2,000.00	$2,000.00	$0.00	$0.00	$0.00	$0.00	$2,000.00	$2,000.00
$0.00	$2,000.00	$2,000.00	$0.00	$0.00	$0.00	$0.00	$2,000.00	$2,000.00
$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

***Note:** The IDV column indicates whether the Customer Identification Program (CIP) process was initiated; it does not indicate whether the employee passed or not.*

Key information found in this report:

- YTD totals for contributions initiated by the employer (includes contributions made via payroll)
- Employees' HSA and employment status

4.4 HSA Plan Funding Collection Notification

Purpose	Reflects the funds for recently submitted payroll and employer contributions and the date that the funds will be pulled from the employer's bank account ('Funding Date'). This report also lists any contributions/funds on hold.
When is it available?	One business day prior to funds being pulled from employer account and posting to the employees' HSAs
Report Format	PDF

Test Leahys Lemons LLC

HSA Plan Funding Collection Notification

Create Date: 8/27/2015

SUMMARY

FUNDS TO BE COLLECTED

Funding will be pulled as described below.

Contribution Type	Amount	Funding Account	Funding Date
Employer Contribution	$0.00	xx7911	8/28/2015
Employee Payroll Deduction	$110.00	xx7911	8/28/2015
Totals	**$110.00**		

FUNDS ON HOLD

These employees have contributions posted but did not process because either the HSA integration status is not active or the acceptance of HSA Terms and Conditions (T&C) is not complete. Once these conditions have been met, the contributions will process and a new notification will be available.

Contribution Type	Amount
Totals	**$0.00**

Test Leahys Lemons LLC

HSA Plan Funding Collection Notification

Create Date: 8/27/2015

FUNDS TO BE COLLECTED

Identifier	Last Name	First Name	Contribution Date	Employer Contribution	Employee Payroll Deduction	Total Contribution
000001239	FIRST-TIME	WALLY	8/26/2015	$0.00	$40.00	$40.00
1234567	Jenkins	Angela	8/26/2015	$0.00	$20.00	$20.00
201504280820 469938	PORTAL	LISA	8/26/2015	$0.00	$50.00	$50.00
			Totals:	**$0.00**	**$110.00**	**$110.00**

FUNDS ON HOLD

Identifier	Last Name	First Name	Contribution Date	Employer Contribution	Employee Payroll Deduction	Total Contribution	Hold Reason

Note: *When a hold status is removed from an employee's account, the transactions listed in the Funds on Hold section are moved to the Funds to be Collected section, and a new notification is generated the next business day.*

Key information found in this report:

- Funding amount that will be pulled from employer bank account
- Contribution date of recently submitted funding
- Which funds were placed on hold of the recently submitted funds

4.5 HSA All Account Report

Purpose	Provides a variety of HSA data to assist with administrative tasks, such as reviewing which accounts can be funded, assisting with employees' questions, and obtaining account numbers to set up direct deposit contributions (if applicable).
When is it available?	Weekly
Report Format	Excel

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	First Name	MI	Last Name	Masked SSN	Identifier	Account Number	Division	Branch Code	Account Status	Employment Status	Employment Status Effective Date	Current HDHP Coverage Level	Account Effective Date
2	TESTER		COBRA	0123	9004373175	32466792	North		Closed	Active	11/18/2015	Family	11/18/2015
3	JOHNNY		TEST	8756	20191721522 2810	60180223	South		Moved	Terminated	6/22/2019		
4	Cold		Pizza	8777	555	72112184	South		Pending	Active	1/1/2021	Individual	1/1/2021
5	TESTER		RETIREE	0123	9004373183	32466805	West		Active	Active	11/18/2015	Family	11/18/2015
6	CHRISTA		SHAREPOINT	6201	9004375383	32469192	North		Active	Active	11/18/2015	Individual	11/18/2015
7	JASON		SHAREPOINT	6203	9004375404	32469205	UNASSIGNED			Terminated	11/18/2015		
8	ROBERT		SHAREPOINT	6200	9004375375	32469184	West			Retired	10/1/2019		

Key information found in this report:

- Current account status for every employee, plus account open, effective, and close dates.
- Current IDV status for every employee with an open account.
- Last debit card mail date and last contribution date for every employee.
- If applicable, employee account numbers for direct deposit purposes.

4.6 Fee Funding Notification

Purpose	Reflects the employer fees assessed for the prior month and serves as your program's monthly invoice. Please note that fees are calculated on the first business day of the month. This report also includes a list of employees for whom fees were assessed (either posted or waived).
When is it available?	Monthly (date varies; generated between the second and 18th business day of the month)
Report Format	Excel, PDF

All 23 Active Employees show in list

Identifier	Last Name	First Name	MI	Fee Create Date	Fee Type
9001514625	LAST1	EMPLOYEE1		11/1/2016	HSA Service Fee
9001437690	LAST2	EMPLOYEE2		11/1/2016	HSA Service Fee
9001503976	LAST3	EMPLOYEE3		11/1/2016	HSA Service Fee
9000025858	LAST4	EMPLOYEE4		11/1/2016	HSA Service Fee
9000025866	LAST5	EMPLOYEE5		11/1/2016	HSA Service Fee
9000025874	LAST6	EMPLOYEE6		11/1/2016	HSA Service Fee
9000025882	LAST7	EMPLOYEE7		11/1/2016	HSA Service Fee
9001437703	LAST8	EMPLOYEE8		11/1/2016	HSA Service Fee
9001514633	LAST9	EMPLOYE			
9001503984	LAST10	EMPLOYE			
888995763	LAST11	EMPLOYE			
9001437716	LAST12	EMPLOYE			
9001514641	LAST13	EMPLOYE			
9001503992	LAST14	EMPLOYE			
9100006391	LAST15	EMPLOYE			
9000063566	LAST16	EMPLOYE			
9000004791	LAST17	EMPLOYE			
9001437724	LAST18	EMPLOYE			
9000004775	LAST19	EMPLOYE			
9000004767	LAST20	EMPLOYE			
9000063574	LAST21	EMPLOYE			
0005777654	LAST22	EMPLOYE			
9000004783	LAST23	EMPLOYE			

Fee Funding Notification

Created on: 11/10/2016

Any Company (COCODE)
1515 N River Center Drive
Milwaukee, WI 53202

Invoice #: W1014
HSA Bank
P.O. Box 939
Sheboygan, WI 53081

HSA Fees Summary

Fee Type	Fee Amount	Active Employees	Fees Invoiced	Fees Waived	Total Amount
HSA Service Fee	$2.50	23	18	5	$45.00
Total		**23**			**$45.00**

Key information found in this report:

- Count of HSAs billed for a specific month
- Total fees charged for a specific month

4.7 Account Balance Detail Report

Purpose	Provides plan balance summaries and employee account balance detail as of specified date.
When is it available?	Monthly, On Demand
Report Format	Excel

Summary:

Commuter Plans Testing
Account Balance Detail Report
Available Balance
As Of 9/26/2017
Plan Year: 01/01/2017 - 12/31/2017

Plan	Consumers	Election	Incoming Rollovers	Paid*	Pending	Consumer Deposits	Plan Year Balance	Available Balance
Mass Transit 01/01/2017 - 12/31/2017	11	$4,070.00	$50.00	$0.00	$0.00	$1,502.00	$1,010.00	$1,552.00
Parking 01/01/2017 - 12/31/2017	8	$4,258.28	$0.00	$0.00	($339.96)	$2,437.66	$3,408.32	$2,097.70
Parking Post Tax 2017	5	$1,185.00	$0.00	$0.00	($90.00)	$762.42	$905.00	$672.42
	Consumers	Election	Incoming Rollovers	Paid*	Pending	Consumer Deposits	Plan Year Balance	Available Balance
Grand Totals:	11	$9,513.28	$50.00	$0.00	($429.96)	$4,702.08	$5,323.32	$4,322.12

* Paid amounts are based on the date the payment is generated not the effective date of the payment.

Detail:

Employer Name	Plan Year	Plan	Identifier	Employment Status	Last Name	First Name	Election Effective Date	Election Termination Date	Election	Incoming Rollovers	Paid*	Pending	Consumer Deposits	Plan Year Balance	Available Balance
Commuter Plans Testing	01/01/2017 - 12/31/2017	Mass Transit 01/01/2017 - 12/31/2017	9999119812	Active (1/1/2015)	commutertest	testing	8/1/2017		$0.00	$50.00	$0.00	$0.00	$0.00	N/A	$50.00
Commuter Plans Testing	01/01/2017 - 12/31/2017	Mass Transit 01/01/2017 - 12/31/2017	Testing2224	Active (1/1/2015)	Testing	Reenroll	1/1/2017	4/1/2017	$2,400.00	$0.00	$0.00	$0.00	$600.00	$0.00	$600.00
Commuter Plans Testing	01/01/2017 - 12/31/2017	Mass Transit 01/01/2017 - 12/31/2017	8	Active (1/1/2015)	Testing10	Seven	1/1/2017		$255.00	$0.00	$0.00	$0.00	$191.16	$255.00	$191.16
Commuter Plans Testing	01/01/2017 - 12/31/2017	Mass Transit 01/01/2017 - 12/31/2017	7	Active (1/1/2015)	Testing11	Eight	1/1/2017		$125.00	$0.00	$0.00	$0.00	$93.78	$125.00	$93.78
Commuter Plans Testing	01/01/2017 - 12/31/2017	Mass Transit 01/01/2017 - 12/31/2017	6	Active (1/1/2015)	Testing12	Nine	1/1/2017		$125.00	$0.00	$0.00	$0.00	$93.78	$125.00	$93.78
Commuter Plans Testing	01/01/2017 - 12/31/2017	Mass Transit 01/01/2017 - 12/31/2017	5	Active (1/1/2015)	Testing4	One	1/1/2017	4/1/2017	$255.00	$0.00	$0.00	$0.00	$63.72	$0.00	$63.72
Commuter Plans Testing	01/01/2017 - 12/31/2017	Mass Transit 01/01/2017 - 12/31/2017	4	Active (1/1/2015)	Testing5	Two	1/1/2017	5/1/2017	$255.00	$0.00	$0.00	$0.00	$84.96	$0.00	$84.96
Commuter Plans Testing	01/01/2017 - 12/31/2017	Mass Transit 01/01/2017 -	3	Active (1/1/2015)	Testing6	Three	1/1/2017		$100.00	$0.00	$0.00	$0.00	$75.06	$100.00	$75.06

Key information found in this report:

- Summary and detail of year-to-date contributions, payroll deductions, claims paid, and other valuable account information.
- Contains employer summary data and individual account holder plan information.

4.8 Enhanced Debit Card Settlement Report

Purpose	Provides a summary of the settled debit card transactions that require funding by settlement date.
When is it available?	On Demand
Report Format	PDF, Excel

Enhanced Debit Card Settlement Report
Lighthouse1 Benefits Card
Create Date: 05/30/2011

Settlement Date: 1/11/2010

Settled amount - HRA

Identifier	Participant Name	Plan	Settlement Account	Transaction Date	Reference Number	Type	Amount
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02
0094	OverEighteen, PstAdd-Y	HRA-S Allow DC		1/2/2010		Claim	$0.02

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Key information found in this report:

- The debit card transactions needing funding by settlement date.

4.9 Enrollment Report

Purpose	Provides information about enrollments for an employer group by plan and plan year.
When is it available?	Monthly, On Demand
Report Format	PDF, Excel, Data File

Commuter Plans Testing
Member Enrollment Report
As of 9/26/2017
Plan Year: 1/1/2017 - 12/31/2017

Identifier	Participant Name	Address Type	Address Line 1	Address Line 2	City	State	Zip	Country	Enrollment Effective Date	Status	Last Update	First Pay Date	Plan Name	Employer Contribution	Election	Eligible Amount	Payroll Deduction	Total Deduction	Reim Method	Auto Claims	Enroll Method
9999119812	commutertest, testing	MailingAddress	123 Any St		Town	AL	55555	UNITED STATES	08/01/2017	A	7/27/2017	-	Mass Transit	$0.00 ($0.00/mo)	$0.00 ($0.00/mo)	$50.00	$0.00	$0.00	DC (CK)	N	M
Testing2224	Testing, Reenroll	MailingAddress	123 Any Ave		Town	AL	55555	UNITED STATES	07/01/2017	A	7/13/2017	7/7/2017	Parking	$0.00 ($0.00/mo)	$2,295.00 ($255.00/mo)	$2,295.00	$127.50	$127.50	DC (CK)	N	M
Testing2224	Testing, Reenroll	MailingAddress	123 Any Ave		Town	AL	55555	UNITED STATES	07/01/2017	A	7/13/2017	7/7/2017	Parking Post Tax	$0.00 ($0.00/mo)	$405.00 ($45.00/mo)	$405.00	$22.50	$22.50	DC (CK)	N	M
8	Testing10, Seven	MailingAddress	67264 Over Ln		Town	WI	75555	UNITED STATES	01/01/2017	A	8/14/2017	1/6/2017	Mass Transit	$0.00 ($0.00/mo)	$255.00 ($21.25/mo)	$255.00	$10.62	$10.62	DC (CK)	N	F
8	Testing10, Seven	MailingAddress	67264 Over Ln		Town	WI	75555	UNITED STATES	08/01/2017	A	8/14/2017	8/4/2017	Parking	$0.00 ($0.00/mo)	$533.36 ($100.00/mo)	$533.36	$50.00	$50.00	DC (CK)	N	F
7	Testing11, Eight	MailingAddress	1727 5th Ave		Town	WI	75555	UNITED STATES	01/01/2017	A	7/13/2017	1/6/2017	Mass Transit	$0.00 ($0.00/mo)	$125.00 ($10.42/mo)	$125.00	$5.21	$5.21	DC (CK)	N	F
7	Testing11, Eight	MailingAddress	1727 5th Ave		Town	WI	75555	UNITED STATES	01/01/2017	A	7/13/2017	1/6/2017	Parking	$0.00 ($0.00/mo)	$100.00 ($8.33/mo)	$100.00	$4.17	$4.17	DC (CK)	N	F
6	Testing12, Nine	MailingAddress	8833 7th St		Town	WI	75555	UNITED STATES	01/01/2017	A	7/13/2017	1/6/2017	Mass Transit	$0.00 ($0.00/mo)	$125.00 ($10.42/mo)	$125.00	$5.21	$5.21	DC (CK)	N	F
6	Testing12, Nine	MailingAddress	8833 7th St		Town	WI	75555	UNITED STATES	01/01/2017	A	7/13/2017	1/6/2017	Parking	$0.00 ($0.00/mo)	$150.00 ($12.50/mo)	$150.00	$6.25	$6.25	DC (CK)	N	F
3	Testing6, Three	MailingAddress	7891 Start St		Town	WI	75555	UNITED STATES	01/01/2017	A	8/15/2017	1/6/2017	Mass Transit	$0.00 ($0.00/mo)	$100.00 ($8.33/mo)	$100.00	$4.17	$4.17	DC (CK)	N	F
3	Testing6, Three	MailingAddress	7891 Start St		Town	WI	75555	UNITED STATES	08/01/2017	A	8/15/2017	8/4/2017	Parking	$0.00 ($0.00/mo)	$584.96 ($100.00/mo)	$584.96	$50.00	$50.00	DC (CK)	N	F
3	Testing6, Three	MailingAddress	7891 Start St		Town	WI	75555	UNITED STATES	01/01/2017	A	8/15/2017	1/6/2017	Parking Post Tax	$0.00 ($0.00/mo)	$245.00 ($20.42/mo)	$245.00	$10.21	$10.21	DC (CK)	N	F
2	Testing7, Four	MailingAddress	92184 1st Ave		Town	WI	75555	UNITED STATES	01/01/2017	A	8/15/2017	1/6/2017	Mass Transit	$0.00 ($0.00/mo)	$100.00 ($8.33/mo)	$100.00	$4.17	$4.17	DC (CK)	N	F
2	Testing7, Four	MailingAddress	92184 1st Ave		Town	WI	75555	UNITED STATES	05/01/2017	A	8/15/2017	5/12/2017	Parking	$0.00 ($0.00/mo)	$84.96 ($0.00/mo)	$84.96	$0.00	$0.00	DC (CK)	N	F
2	Testing7, Four	MailingAddress	92184 1st Ave		Town	WI	75555	UNITED STATES	01/01/2017	A	8/15/2017	1/6/2017	Parking Post Tax	$0.00 ($0.00/mo)	$345.00 ($28.75/mo)	$345.00	$14.38	$14.38	DC (CK)	N	F
9	Testing9, Six	MailingAddress	9166 3rd Ln		Town	WI	75555	UNITED STATES	01/01/2017	A	7/13/2017	1/6/2017	Mass Transit	$0.00 ($0.00/mo)	$255.00 ($21.25/mo)	$255.00	$10.62	$10.62	DC (CK)	N	F
													Totals:	$0.00	$5,703.28	$5,753.28	$325.01	$325.01			

Total Participants: 8

Total Elections and Contributions by Plan:

Plan	Election	Employer Contribution	Total Eligible	Total Enrollments
Mass Transit	$960.00 ($80.00/mo)	$0.00 ($0.00/mo)	$1,010.00	7
Parking	$3,748.28 ($475.83/mo)	$0.00 ($0.00/mo)	$3,748.28	6
Parking Post Tax	$995.00 ($94.17/mo)	$0.00 ($0.00/mo)	$995.00	3

Key

Status		Reimbursement Method		Enroll Method	
A	Active	CK	Check	C	Consumer
LOA	Leave of Absence	DD	Direct Deposit	E	Employer
C	COBRA	RC	Reimbursement Card	F	File
L/O	Laid-Off	DC	Debit Card	M	Manual
R	Retired			WS	Web Service
T	Terminated			A	Auto Enroll

Key information found in this report:

- The enrollments for the employer group.
- The consumers enrolled in a plan.

4.10 Repayments Report

Purpose	Provides information about repayments for a specific date range. Assists in the review and audit of repayments for the employer or placing dollar amounts on the employee's W2. Repayments to the plan are required to be made by members for ineligible or unsubstantiated charges.
When is it available?	Monthly, On Demand
Report Format	PDF, Excel, Data File

Summary:

Creative Companies
Repayments Report
1/1/2013 - 7/31/2013

SUMMARY

Repayment Method	Created Repayments	Scheduled Repayments	Received Repayments	Claims Applied	Cancelled Repayments
Checks	$0.00	N/A	$0.00	$0.00	$0.00
Electronic Funds Transfers	$25.00	$25.00	$0.00	N/A	$0.00
Payroll Deductions	$0.00	$0.00	$0.00	N/A	N/A
Provider	$0.00	N/A	$0.00	N/A	N/A
TOTALS	**$25.00**	**$25.00**	**$0.00**	**$0.00**	**$0.00**

Detail:

Creative Companies
Repayments Report
1/1/2013 - 7/31/2013

ELECTRONIC FUNDS TRANSFERS

Identifier	Participant Name	Claim Number	Create Date	Effective Date	Repayment Amount	Status	Employer Credited
909000026	Annis, Jordan	CRE000130723C0000101	7/30/2013	8/1/2013	$25.00	Scheduled	Yes

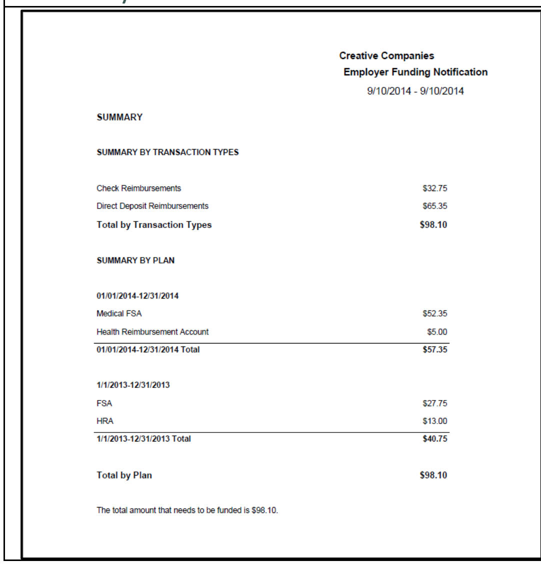
Key information found in this report:

- The repayment information for a specific date range.
- The status of all repayments by employee.
- Dollar amounts that are required to be collected from the employee or added to the employee's gross W2 wages.

4.11 Employer Funding Notification

Purpose	Provides information about funds to be collected from the employer, including funding adjustments.
When is it available?	One business day prior to funds being pulled from employer account.
Report Format	PDF, Excel

Summary



Creative Companies
Employer Funding Notification
9/10/2014 - 9/10/2014

SUMMARY

SUMMARY BY TRANSACTION TYPES

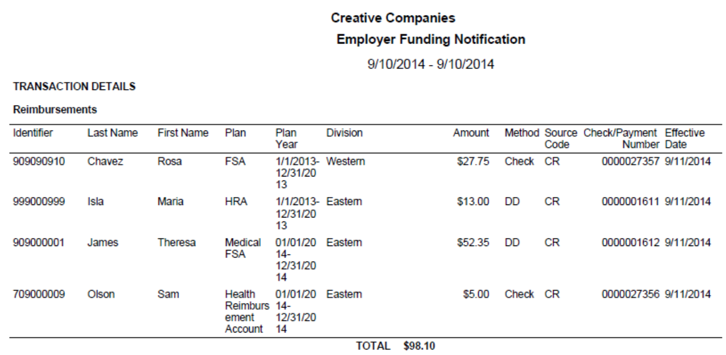
Check Reimbursements	$32.75
Direct Deposit Reimbursements	$65.35
Total by Transaction Types	**$98.10**

SUMMARY BY PLAN

01/01/2014-12/31/2014	
Medical FSA	$52.35
Health Reimbursement Account	$5.00
01/01/2014-12/31/2014 Total	**$57.35**
1/1/2013-12/31/2013	
FSA	$27.75
HRA	$13.00
1/1/2013-12/31/2013 Total	**$40.75**
Total by Plan	**$98.10**

The total amount that needs to be funded is $98.10.

Detail



Creative Companies
Employer Funding Notification
9/10/2014 - 9/10/2014

TRANSACTION DETAILS

Reimbursements

Identifier	Last Name	First Name	Plan	Plan Year	Division	Amount	Method	Source Code	Check/Payment Number	Effective Date
909090910	Chavez	Rosa	FSA	1/1/2013-12/31/2013	Western	$27.75	Check	CR	0000027357	9/11/2014
999000999	Isla	Maria	HRA	1/1/2013-12/31/2013	Eastern	$13.00	DD	CR	0000001611	9/11/2014
909000001	James	Theresa	Medical FSA	01/01/2014-12/31/2014	Eastern	$52.35	DD	CR	0000001612	9/11/2014
709000009	Olson	Sam	Health Reimbursement Account	01/01/2014-12/31/2014	Eastern	$5.00	Check	CR	0000027356	9/11/2014
					TOTAL	**$98.10**				

Key information found in this report:

- The information about funds to be collected from the employer.
- The details about claims needing funding and any funding adjustments.

4.12 Payroll Deduction Notification

Purpose	Provides information on what deductions are scheduled to be made of an upcoming payroll date.
When is it available?	One business day prior to payroll date.
Report Format	Excel

Summary

Commuter Plans Testing
Payroll Deduction Report
9/15/2017

SUMMARY

Plan Name		Total Deductions
Mass Transit		$40.00
Parking		$237.92
Parking Post Tax		$47.09
	Total:	$325.01

Detail

Commuter Plans Testing
Payroll Deduction Report
9/15/2017

Bi-Weekly (B24)

Identifier	Participant Name	Plan Name	Pay Period Deduction	Total Pay Period Deduction
Testing2224	Testing, Reenroll	Parking	$127.50	$150.00
Testing2224	Testing, Reenroll	Parking Post Tax	$22.50	
8	Testing10, Seven	Mass Transit	$10.62	$60.62
8	Testing10, Seven	Parking	$50.00	
7	Testing11, Eight	Mass Transit	$5.21	$9.38
7	Testing11, Eight	Parking	$4.17	
6	Testing12, Nine	Mass Transit	$5.21	$11.46
6	Testing12, Nine	Parking	$6.25	
3	Testing6, Three	Mass Transit	$4.17	$64.38
3	Testing6, Three	Parking	$50.00	
3	Testing6, Three	Parking Post Tax	$10.21	
2	Testing7, Four	Mass Transit	$4.17	$18.55
2	Testing7, Four	Parking	$0.00	
2	Testing7, Four	Parking Post Tax	$14.38	
9	Testing9, Six	Mass Transit	$10.62	$10.62
			Total:	$325.01

Key information found in this report:

- The payroll deduction amounts that will be posted to employee accounts on an upcoming payroll.

4.13 Account Balance Report

Purpose	Similar to the Account Balance Detail Report however this report only contains the consumer information – no summary.
When is it available?	On Demand
Report Format	PDF, Excel, Data File

Test Leahys Lemons LLC
Account Balance Report
As Of 6/1/2018
Plan Year: 4/1/2015 - 3/31/2016

Plan: Medical FSA

Identifier		Election	Employer Contribution	Rollover Contribution	Paid*	Pending	Participant Deposits	Employer Deposits	Plan Year Balance	Available Balance	Cash Balance
999123456		$200.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$200.00	$200.00	$0.00
556759942		$1,000.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$1,000.00	$1,000.00	$0.00
Plan Totals:	2	$1,200.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$1,200.00	$1,200.00	$0.00

Grand Totals:		Election	Employer Contribution	Rollover Contribution	Paid*	Pending	Participant Deposits	Employer Deposits	Plan Year Balance	Available Balance	Cash Balance
Participants:	2	$1,200.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$1,200.00	$1,200.00	$0.00
Employer Savings:		$0.00									

* Paid amounts are based on the date the payment is generated not the effective date of the payment.

R - Debit card refunds are deducted from the paid amount.

T - Indicates a terminated election.

Key information found in this report:

- The balance information by plan and by employee.
- The enrollment information by plan and by employee.
- The year-to-date paid claims, payroll deductions, and employer contributions (if any) by plan and by employee.

4.14 Claim History Report

Purpose	Provides information on claims submitted during a specified time period, including claim status, amount, and method filed.
When is it available?	On Demand
Report Format	PDF, Excel, Data File

Summary:

The Vegetable Garden LLC
Claim History Report
1/1/2017 - 6/4/2018

Plan Year: 1/1/2017 - 12/31/2017 Created on: 6/4/2018

Plan	Claim Amount	Paid	Pending	Denied
Limited FSA 01/01/2017 - 12/31/2017	$1.00	$0.00	$0.00	$1.00
Health Reimbursement Arrangement 01/01/2017 - 12/31/2017	$108.91	$0.00	$31.41	$77.50
Grand Totals:	$109.91	$0.00	$31.41	$78.50

Detail:

The Vegetable Garden LLC (VEG547)
Claim History Report
1/1/2017 - 6/4/2018

Plan Year: 1/1/2017 - 12/31/2017 Created on: 6/4/2018

Plan: Health Reimbursement Arrangement 01/01/2017 - 12/31/2017

Identifier	Participant Name	Recipient	Claim Number	Method Filed	Image ID	Submit Date	Date Substantiated	Dates of Service	Expense	Claim Amount	Paid	Pending	Denied	Claim Status	Document Required
9000000433	PEPPERS RED	PEPPERS RED	VEG547170223P0000201	P		2/23/2017		2/10/2017	Undefined	$2.50	$0.00	$0.00	$2.50	Denied	Y
9000000433	PEPPERS RED	PEPPERS RED	VEG547170226M0000101	M		2/26/2017	2/28/2017	2/26/2017	Undefined	$1.20	$0.00	$1.20	$0.00	Pending Reimbursement	N
9000000433	PEPPERS RED	PEPPERS RED	VEG547170228C0010101	C		2/28/2017		2/22/2017	Undefined	$5.21	$0.00	$5.21	$0.00	Pending Reimbursement	N
9000000433	PEPPERS RED	PEPPERS RED	VEG547170228M0000101	M		2/28/2017		2/28/2017	Undefined	$25.00	$0.00	$0.00	$25.00	Denied	Y
9000000433	PEPPERS RED	PEPPERS RED	VEG547170228M0000201	M		2/28/2017		2/28/2017	Undefined	$25.00	$0.00	$25.00	$0.00	Hold	Y
9000000433	PEPPERS RED	PEPPERS RED	VEG547170228P0000101	P		2/28/2017		2/27/2017	Undefined	$25.00	$0.00	$0.00	$25.00	Denied	Y
9000000433	PEPPERS RED	PEPPERS RED	VEG547170712M0000101	M		7/12/2017		2/26/2017	Medical	$25.00	$0.00	$0.00	$25.00	Denied	Y
Plan Totals:										$108.91	$0.00	$31.41	$77.50		

Key information found in this report:

- The current status of claims for selected time frame.
- Which claims require substantiation/collection.
- The claim amount, paid amount, pending amount, and/or denied amount.

4.15 Debit Card Funding Report

Purpose	Provides a summary of the debit card transaction amounts and fee amounts by plan.
When is it available?	On Demand
Report Format	PDF, Excel

Summary:

Test Leahys Lemons LLC
Debit Card Funding Report
1/1/2017 - 6/4/2018

Summary of Debit Card Transactions

Plan Year	Plan	Amount
HRA Active Plan 01/01/2017 - 12/31/2017	01/01/2017 - 12/31/2017	$2.79
HRA Active Plan 01/01/2017 - 12/31/2017	01/01/2017 - 12/31/2017	$1.59
Total:		**$4.38**

Detail:

Test Leahys Lemons LLC
Debit Card Funding Report
1/1/2017 - 6/4/2018

Transactions

Plan Year: HRA Active Plan 01/01/2017 - 12/31/2017

Plan: 01/01/2017 - 12/31/2017

Identifier	Participant Name	Card No	Transaction Date	Settlement Date	Status	Amount
111111122	ROSS, KYLIE	xxxxxxxxxxxx6137	10/30/2017	10/31/2017	Paid	$2.79
111111122	ROSS, KYLIE	xxxxxxxxxxxx6137	11/1/2017	11/2/2017	Paid	$1.59
Total:						**$4.38**
Grand Total:						**$4.38**

Key information found in this report:

- The total amount of settled debit card transactions that require funding for the selected period.
- Individual debit card transaction details.

4.16 Debit Card Mail Date Report

Purpose	Provides the history of the date(s) cards were mailed to cardholders.
When is it available?	On Demand
Report Format	PDF, Excel

Eagle Airlines
Debit Card Mail Date Report
1/1/2016 - 6/4/2018

Summary

Total Cardholders:	51
Total Cards Mailed:	1
Total Cards Not Yet Mailed:	50

Detail

Identifier	Participant Name	Cardholder Name	Card No	Mail Date	Debit Card Vendor
3001588	Bell, Octavius	Bell, Octavius	Request Pending	Not Yet Mailed	Benny
3001582	Best, Ramona	Best, Ramona	Request Pending	Not Yet Mailed	Benny
3001576	Booth, Adam	Booth, Adam	Request Pending		Benny
3001597	Cain, Cailin	Cain, Cailin	Request Pending	Not Yet Mailed	Benny
3001600	Campbell, Macaulay	Campbell, Macaulay	Request Pending	Not Yet Mailed	Benny
3001589	Cervantes, Fitzgerald	Cervantes, Fitzgerald	Request Pending	Not Yet Mailed	Benny
3001614	Christensen, Ali	Christensen, Ali	Request Pending	Not Yet Mailed	Benny
3001598	Cobb, Beverly	Cobb, Beverly	Request Pending	Not Yet Mailed	Benny
3001586	Colon, Britanney	Colon, Britanney	Request Pending	Not Yet Mailed	Benny
3001606	Craig, Clark	Craig, Clark	Request Pending	Not Yet Mailed	Benny
9988002232	Default, Notification	Default, Notification	Request Pending	Not Yet Mailed	Benny
3001612	Dominguez, Addison	Dominguez, Addison	Request Pending	Not Yet Mailed	Benny
3001585	Eaton, Clinton	Eaton, Clinton	Request Pending	Not Yet Mailed	Benny
3001569	Evans, Honorato	Evans, Honorato	Request Pending	Not Yet Mailed	Benny
3001590	Ewing, Deacon	Ewing, Deacon	Request Pending	Not Yet Mailed	Benny
3001583	Flowers, Harper	Flowers, Harper	Request Pending	Not Yet Mailed	Benny
3001604	Franks, Brenden	Franks, Brenden	Request Pending	Not Yet Mailed	Benny

1 of 3

Key information found in this report:

- The date(s) debit cards were mailed to employees.
- Report information delayed approximately 24 hours.

4.17 Debit Card Status Report

Purpose	Provides a list of the cards and current card status that have been issued to cardholders.
When is it available?	On Demand
Report Format	PDF, Excel

Eagle Airlines
Card Status Report
As of: 6/4/2018

Summary

Total Participants:	51
Total Cardholders:	51
Active:	1
Ready to Activate:	50

Detail

Identifier	Participant Name	Cardholder Name	Card No	Status	Mail Date	Status Date	Notes
3001588	Bell, Octavius	Bell, Octavius	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	
3001582	Best, Ramona	Best, Ramona	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	
3001576	Booth, Adam	Booth, Adam	PENDING REQUEST	Active		04/25/2018	
3001597	Cain, Cailin	Cain, Cailin	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	
3001600	Campbell, Macaulay	Campbell, Macaulay	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	
3001589	Cervantes, Fitzgerald	Cervantes, Fitzgerald	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	
3001614	Christensen, Ali	Christensen, Ali	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	
3001598	Cobb, Beverly	Cobb, Beverly	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	
3001586	Colon, Britanney	Colon, Britanney	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	
3001606	Craig, Clark	Craig, Clark	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	
9988002232	Default, Notification	Default, Notification	PENDING REQUEST	Ready to Activate	Not Yet Mailed	11/02/2017	
3001612	Dominguez, Addison	Dominguez, Addison	PENDING REQUEST	Ready to Activate	Not Yet Mailed	03/20/2017	

1 of 4

Key information found in this report:

- The cards issued to employees and/or dependents.
- The status of all debit cards issued.

4.18 Debit Card Transaction Report

Purpose	Provides a list of all debit card transactions by settlement date.
When is it available?	On Demand
Report Format	PDF, Excel, Data File

Eagle Airlines
Debit Card Transaction Report
Transactions Settled Between: 1/1/2017 - 6/4/2018

Settlement Date: 3/21/2017

Identifier	Participant Name	Card No	Plan Year	Plan	Transaction Date	Status	Amount
3001589	Cervantes, Fitzgerald	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Medical FSA	2/20/2017	Paid	$36.50
3001589	Cervantes, Fitzgerald	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Medical FSA	1/31/2017	Paid	$100.00
3001614	Christensen, Ali	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Limited FSA	2/25/2017	Paid	$20.00
3001586	Colon, Britanney	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Limited FSA	3/5/2017	Paid	$55.00
3001607	Gray, Wynne	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Mass Transit	3/1/2017	Paid	$120.00
3001587	Hensley, Clarke	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Medical FSA	3/17/2017	Paid	$25.00
3001596	Mullen, Kareem	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Limited FSA	2/11/2017	Paid	$150.00
3001616	Yang, Lila	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Limited FSA	3/1/2017	Paid	$50.00
3001616	Yang, Lila	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Limited FSA	1/18/2017	Paid	$25.00
3001586	Colon, Britanney	xxxxxxxxxxxxPEND	01/01/2017 - 12/31/2017	Dependent Care FSA	3/21/2017	Refund	($300.00)

1 of 2

Key information found in this report:

- The settled debit card transactions by employee and plan.
- Includes transaction date and transaction status.

4.19 Payment History Report

Purpose	Provides all reimbursements/payments during a specified time period.
When is it available?	On Demand
Report Format	PDF, Excel, Data File

Summary:

Eagle Airlines
Payment History Report
1/1/2017 - 6/30/2017

Summary

PAYMENT SUMMARY BY METHOD

Division	Total Checks	Total EFTs	Total Debit Card	Total Payments	Total Voided Checks	Total Cancelled EFTs	Total Repayments	Grand Total
LAX	$0.00	$0.00	($93.50)	($93.50)	$0.00	$0.00	$0.00	($93.50)
MSP	$0.00	$0.00	($150.00)	($150.00)	$0.00	$0.00	$0.00	($150.00)
SEA	$0.00	$0.00	$215.00	$215.00	$0.00	$0.00	$0.00	$215.00
Grand Totals:	**$0.00**	**$0.00**	**($28.50)**	**($28.50)**	**$0.00**	**$0.00**	**$0.00**	**($28.50)**

Detail:

Eagle Airlines
Payment History Report
1/1/2017 - 6/30/2017

Division: LAX

PAYMENT SUMMARY BY METHOD

Method	Amount	Number of Payments
Debit Card	($93.50)	6
Total Payments:	**($93.50)**	**6**
Grand Total:	**($93.50)**	

DEBIT CARD

Identifier	Participant Name	Plan	Plan Year	Effective Date	Settlement Date	Amount	Status
3001589	Cervantes, Fitzgerald	Medical FSA	01/01/2017-12/31/2017	03/21/2017	03/21/2017	$36.50	Paid
3001589	Cervantes, Fitzgerald	Medical FSA	01/01/2017-12/31/2017	03/21/2017	03/21/2017	$100.00	Paid
3001586	Colon, Britanney	Dependent Care FSA	01/01/2017-12/31/2017	03/21/2017	03/21/2017	($300.00)	Refund
3001586	Colon, Britanney	Limited FSA	01/01/2017-12/31/2017	03/21/2017	03/21/2017	$55.00	Paid
3001587	Hensley, Clarke	Medical FSA	01/01/2017-12/31/2017	03/21/2017	03/21/2017	$25.00	Paid
3001587	Hensley, Clarke	Medical FSA	01/01/2017-12/31/2017	03/21/2017	03/21/2017	($10.00)	Refund
					Total:	**($93.50)**	

Key information found in this report:

- The information for all payments by plan and by employee.
- Summary and detail information included.
- Payment status.

4.20 Reimbursement Detail Report

Purpose	Provides information on all claims reimbursed during a specified time period.
When is it available?	On Demand
Report Format	PDF, Excel, Data File

Eagle Airlines
Reimbursement Detail Report
1/1/2017 - 6/30/2017

SUMMARY

Reimbursement Summary by Plan
01/01/2017-12/31/2017

Plan	Amount	Number
Dependent Care FSA	($600.00)	2
Limited FSA	$300.00	5
Mass Transit	$120.00	1
Medical FSA	$151.50	4
Total:	**($28.50)**	**12**
Grand Total:	**($28.50)**	**12**

DETAIL

01/01/2017-12/31/2017
Plan: Dependent Care FSA

Identifier	Last Name	First Name	Claim No.	Reimb. Date	Amount	Method	Payment No.	Action Date	Include Voided Checks and Canceled EFT's
3001586	Colon	Britanney		03/21/2017	($300.00)	DC	EHB20022670 019		
3001596	Mullen	Kareem		03/21/2017	($300.00)	DC	EHB20022670 025		
				Total:	($600.00)				

* Voided checks and failed EFT transactions are represented in this report.

1 of 3

Key information found in this report:

- The information of all claims paid during the specified period.
- Can include debit card transactions.
- Provides reimbursement dates and payment numbers.

Appendix A: Common Report Needs/Scenarios

Key Program Questions	Report Name	Frequency	Tips
Overall Program Success			
Where do my employees use their HSA dollars?	Program Summary Report	Monthly	Includes types of merchants (dentist, doctor, etc.)
Are my employees "spenders" or "savers"?		Monthly	Percentage of YTD contributions that are spent from HSAs
What is the average HSA balance?		Monthly	Average balances and balances in specific ranges are provided.
Enrollment Reports			
How do I know if an employee is enrolled or see the status of all HSAs in the program?	Account Detail Report (Summary)	On demand, monthly	Remember that accounts with a mid-month HDHP or enrollment effective date are opened on the first of the following month.
How do I see accounts that recently opened?			Apply a filter to the column headings row and use the 'Account Creation Date' column to find recently opened accounts.
How do I see accounts that are terminated?			Apply a filter to the column headings row and use the 'Employment Status' column to find terminated accounts.
How do I know if any employee accounts may close due to the Customer Identification Program process?	HSA All Account Report	Weekly	The 'Date IDV Passed' column will be blank.
How do I see how long an employee's account is pending due to CIP (identity verification)?			Review the 'Aged Date' column; after 90 days, if the identity of the employee cannot be verified, the HSA will close.
Contribution Reports			
How do I confirm that a contribution was sent to a particular employee's HSA?	Account Detail Report (Detail)	On demand, monthly	Funding transactions initiated by the employer are captured in this report. Direct deposit/ACH funding does not currently appear on these reports.
How much were the employer contributions that were sent to an HSA for a period of time?			
What funding was recently completed on the Employer Administration Site?			
Which funds placed on hold for funding were recently completed on the Employer Administration Site?	HSA Plan Funding Collection Notification	Ad hoc	Funds are placed on hold and remain with the employer for accounts that have a block/hold placed on them. These may include, but are not limited to, suspected fraud, an SSN being on the death master list, the participant having access to FSA funds during a grace period, or the account not yet being effective.
How much money will be pulled from my employer bank account for funding recently completed?			This report is available one business day prior to funds being pulled from employer bank account and posting to the employees' HSAs.
Billing Reports			
How many accounts were I billed for last month?	Fee Funding Notification	Monthly	Fees are calculated on the first business day of the month.

Key Program Questions	Report Name	Frequency	Tips
Funding Reports			
How do I confirm year-to-date payroll contributions?	Account Balance Report	On demand	YTD payroll contributions can be found in column P, Participant Deposit. Participant deposits show a member's payroll contributions to the plan based on their payroll schedule.
	Account Balance Detail Report	On demand, monthly	
How do I confirm a member's available cash balance in an FSA plan?	Account Balance Report	On demand	The available cash balance equals funds left to spend in the plan year less any paid or pending claims.
	Account Balance Detail Report	On demand, monthly	
How do I confirm a member's rollover from the previous plan year?	Account Balance Report	On demand	Rollover dollars from the prior plan year that are available to the member in the new plan year can be found in column K. The rollover is added to the member's total available cash balance.
	Account Balance Detail Report	On demand, monthly	

Appendix B: Notional Common Report Needs/Scenarios

Key Program Questions	Report(s) Name	Frequency	Tips
Manage Overall Program Success			
How can I confirm who currently has a debit card, the card status and when the cards were issued?	• Debit Card Status Report • Debit Card Mail Date Report	On Demand	View a list of the cards and current card status that have been issued to cardholders, as well as the history of the date(s) cards were mailed to cardholders.
Enrollment Reports			
How do I know if an employee is enrolled or see the status of all enrollments in the program?	• Enrollment Report	On Demand, Monthly	Each enrollment has a separate record on both reports. The enrollment report contains information specific to the enrollment.
Transaction Reports			
How do I determine the claim funding amount?	• Employer Funding Notification	1 Business day prior to funding	Funding reports are generally created on every business day. The funding amounts are shown on the first tab with the details for the funding amounts are on the second tab.
How can I review claims submitted, their status and claims reimbursed?	• Claim History Report • Reimbursement Detail Report	On Demand, Monthly	Provides information on claims submitted during a specified time period, including claim status and information on all claims reimbursed for a specified time period.
How do I confirm payroll deduction and employer contribution amounts?	• Payroll Deduction Notification	1 Business day prior to posting	Upcoming payroll deduction and employer contribution amounts are listed for each employee with a scheduled transaction.
How do I review debit card transactions?	• Debit Card Transaction Report	On Demand	Provides a list of all debit card transactions by settlement date.
How do I review settled debit card transactions?	• Enhanced Debit Card Settlement Report	On Demand	Provides a summary of all settled debit card transactions for a specified date range.
How do I review pending repayments?	• Repayments Report	On Demand, Monthly	View the status of repayments for all employees. Can be used to pending repayments as taxable income on W2s.

Appendix C: Frequently Asked Questions

1. **How long is a report available on the Employer Administration Site?**
   Reports auto-generated through the application are currently available indefinitely. Reports generated manually by an employer are available until canceled by the employer.

2. **Why do some of the available reports show no data?**
   For audit purposes, some reports with no activity are still generated to demonstrate that no data was reported during a specific period.

3. **How do I opt out of a report notification?**
   Call our Business Relations department at 866-357-5232, Monday – Friday, 7 a.m. – 7 p.m., Central Time, and any of our representatives would be happy to submit a request to turn off your report notifications.

4. **Where can I find a report that shows the funding that I completed through the Employer Administration Site?**
   The Account Detail Report reflects any funding that is processed online.

5. **Can I review contribution corrections in reports?**
   Unfortunately, contribution corrections do not reflect on the contribution reports. The Contribution Report reflects only funds going into the account.

6. **How do I determine the amount required to fund claims for my HRA and/or FSA?**
   The Account Balance Detail Report allows you to view plan balance summaries and consumer account balance detail as of a specified date.

7. **Where can I see overpayments from the HRA and/or FSA?**
   The Repayments Report provides a summary and detail of consumer repayments due for specific period of time. These are potential dollar amounts that may need to be placed on the employee’s W2.

8. **Where can I see claims paid and their dollar amount for HRA and/or FSA?**
   The Claim History and Reimbursement History Reports provide information on claim amount, paid date, and submission method.

9. **What is an employer’s responsibility for unsubstantiated claims?**
   Per IRS regulations, all claims must be substantiated. If a claim is paid without substantiation, the employer (plan sponsor) is responsible for seeking repayment of the plan by the employee, and if unsuccessful, including the amount of the unsubstantiated charges in the gross wages on the employee’s W2.

Appendix D: Using the 'Auto Filter' Function in MS Excel

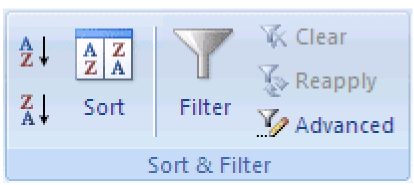
Using Auto Filter to filter data is a quick and easy way to find and work with a subset of data in a range of cells or a table and can easily help you see a group of accounts that meet specific criteria. Filtered data displays <u>only</u> the rows that meet criteria that you specify and hides rows that you do not want displayed. After you filter data, you can copy, find, edit, format, chart, and print the subset of filtered data without rearranging or moving it.

You can also filter by more than one column. Filters are additive, which means that each additional filter is based on the current filter and further reduces the subset of data.

Note: When you use the **Find** dialogue box to search filtered data, only the data that is displayed is searched; data that is not displayed is not searched. To search all the data, clear all filters.

Filter text

1. **Highlight the row with the column headings.**
2. On the **Data** tab, in the **Sort & Filter** group, click **Filter**.



3. Click the arrow  in the column header.
4. Choose the criteria that you want to display.