

This VISA debit card, provided to you by your employer, gives you easy access to the dollars in your CIGNA HealthCare Flexible Spending Account (FSA).

In most ways, your card works like any debit card. But there are three *important differences.* 

- Use is limited to specific merchants based on the benefit account you have selected, and to expenses deemed eligible by your plan.
- You can't use it at an ATM, or to obtain "cash back" when making a purchase.
- You are not given a PIN with this card. Should a merchant or provider ask you for a PIN, just explain that this particular card does not have one. When given the option between "Debit" and "Credit" at the terminal, choose "Credit."

CIGNA HealthCare members that have requested a privacy restriction regarding their personal health information must note that CIGNA is required to give the subscriber a statement which may contain information relating to specific debit card transactions. Such information may include the date of service, provider name, and amount charged.

"CIGNA" and "CIGNA HealthCare" refer to various operating subsidiaries of CIGNA Corporation. Products and services are provided by these subsidiaries and not by CIGNA Corporation. These subsidiaries include Connecticut General Life Insurance Company, Tel-Drug, Inc. and its affiliates, CIGNA Behavioral Health, Inc., Intracorp, and HMO or service company subsidiaries of CIGNA Health Corporation and CIGNA Dental Health, Inc. In Arizona, HMO plans are offered by CIGNA HealthCare of Arizona, Inc. In California, HMO plans are offered by CIGNA HealthCare of California, Inc. In Virginia, HMO plans are offered by CIGNA HealthCare of Virginia, Inc. and CIGNA HealthCare Mid-Atlantic, Inc. In North Carolina, HMO plans are offered by CIGNA HealthCare of North Carolina, Inc. All other medical plans in these states are insured or administered by Connecticut General Life Insurance Company.







How to use your **CIGNA** HealthCare **Flexible Spending Account** debit card



800483 10/05 © 2005 CIGNA

A Business of Caring.





### What should I do?

- **1.** Read the enclosed Cardholder Agreement.
- **2.** Sign the back of your card to indicate that you understand and accept the terms of this Agreement.
- **3.** Use the card to pay for eligible products and services.
- **4.** Keep all your receipts. CIGNA HealthCare may ask you to provide your receipts to verify your purchases were eligible.

Your CIGNA HealthCare FSA debit card is good for up to three years. Even if you use up this year's dollars, you'll be able to use the card again next year (if you re-enroll in this plan).

## What is an eligible expense?

You can use your card to pay for products and services such as these:

- Copayments at pharmacies, doctor's or dentist's offices
- Prescription drugs and some over-the-counter medications
- Diabetic supplies
- Eye glasses, contact lenses and contact solutions
- Orthodontic devices such as braces
- Podiatry services

For a listing of the products and services eligible under your plan, please refer to your plan documents or **myCIGNA.com**. If you go to a store for a number of items - some eligible expenses, some not - ask the clerk to ring them up separately. Then use your FSA debit card to pay only for eligible items.

Please keep in mind that you are responsible for how the dollars in your FSA are spent. These tax-exempt accounts are governed by the IRS and your plan documents. If you're ever in doubt about the eligibility of a particular product or service, check **myCIGNA.com** or contact Member Services at the toll-free number on your CIGNA HealthCare ID card.

## What if I make a mistake?

Once in a while, a card holder will accidentally use his or her card for a non-eligible item, and occasionally the transaction will go through.

If this happens to you, don't be overly concerned, but do contact CIGNA HealthCare as soon as you become aware of the mistake. We will tell you how to reimburse the account for the ineligible item.

# What if there is not enough money in my account?

What happens when you have a \$25 expense but only \$20 in your FSA? In most cases, the transaction will be denied. However, you can be reimbursed for any eligible expenses with whatever is left in your account. Simply pay for the product or service and submit a claim form, as described in your plan documents and myCIGNA.com.

You can check your account balance:

- Online at myCIGNA.com
- On your latest Explanation of Benefits or monthly statement
- By calling Member Services at the toll-free number on your CIGNA HealthCare ID card

## Do I need receipts?

Possibly, so please save all of your itemized receipts. For some expenses, CIGNA HealthCare may need additional information, including receipts, to verify that the expense is eligible and it complies with IRS rules. That's why it's important for you to save these receipts, and to fax or mail them promptly when CIGNA asks for them.

Without proper receipts, CIGNA HealthCare must consider those expenses ineligible, and you'll have to reimburse your account. You could also jeopardize the tax-exempt status of your account and lose access to your debit card.

To protect your account's tax-exempt status and comply with IRS rules, CIGNA HealthCare may sometimes have to see your receipts.