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HSAToday[®] Online Enrollment Guide

Log in to your HSAToday[®] web portal:

HSAToday Open An Acco	Enrollment ount and Start Saving Today!		Are You Ready? You've taken the first step by electing a
Below are a few of th	he benefits you receive when you open an account		high deductible health plan, saving you premium dollars
0	Save	Pay	Enroll in an HSA and maximize your
5	Maximize Tax Savings Tax-deferred contributions become tax-free when used for qualified heath expenses	Simplify Health Payments Convenient debit card speeds payments and reduce paperwork	Errol Now1
	Invest		Forgot Your Login ID or Password?
Ţ	Grow Your Savings Portfolio models tailored to your specific investment needs		If you have forgotten your Login ID or Password

Click on Enroll Now!

	HSAToday Enrollmen
✓ Step 1.Digbility Step 2.Liver Set up Step 3.Account Information Step 4.Primary Beneficiary Step 5.Contingent Beneficiary	Step 6.Optional Senices
Are you eligible?	
To be Eligible to open and contribute to a Health Savings Account, the following must be true (Please check all that are true):	
I am covered by a HSA-qualified high deductible health plan.	
I have no other health coverage except what is permitted as "other health coverage" under IRC Section 223.	
I am not enrolled in Medicare.	

- Answer the eligibility questions. Check all that are true.
- Click Continue
- Enter Information to Create Your User Account
 - Employer Code is the enrollment code given by your ER/TPA
 - SSN
 - First Name
 - Last Name
 - Email
 - Create Login ID and password be sure to write this down
 - Answer Security Questions be sure to write these down
 - Click Continue

Employer Code:	
SSN:	
Login ID:	
Password:	
	Use 8 to 32 characters, upper and lower
Re-type Password:	case, numbers, special characters, no spaces
Re-type Password: Security Question 1:	case, numbers, special characters, no speces
Re-type Password: Security Question 1: Answer:	case, numbers, special characters, no spaces Select One
Re-type Password: Security Question 1: Answer: Security Question 2:	case, numbers, special characters, no spaces Select One Select One
Re-type Password: Security Question 1: Answer: Security Question 2: Answer:	case, numbers, special characters, no spaces Select One Select One

✔ Step 1. Eligibility	Step 2. User Set-up	Step 3. Account Information	Step 4. Optional Services	Step 5. Review
				Required Information
Create Your User	Account			
Employer Code:		First Name:	Email:	
SSN:		Last Name:		
Login ID:				
Password:				
	Use 8 to 32 characters, upper and lower case, numbers, special characters, no spaces.			
Re-type Password:				
Security Question 1:	Select One	V		
Answer:				
Security Question 2:	Select One	~		
Answer:				
Security Question 3:	Select One	×		
Answer:				

- Complete required information
- Click on High **Deductible Health Plan (HDHP)**
- Complete the Insurance Carrier Name, Effective Date of Coverage, and choose Single or Family
- The Statement Delivery option will default to online statement only.
 - Choose the other option if you want a paper statement (\$3.00 monthly fee)
- Click Continue

Social Security Number: 000-06-4279		Address 1:		
Date of Birth:	VV	Address 2:		
First Name: Jojo		City:		
Middle Initial:		State:	AK 🔽 Zip:	
Last Name: Bean		Country:	United States of America	~
Home Phone:		Mother's Maiden Name:		
Work Phone:		City of Birth:		
Email: afarley@dpath.	.com			
Employer Information High Deductible Health Plan (HDHP) Info	rmation			
Employer Information High Deductible Health Plan (HDHP) Info Health Plan Selection : -Select HDHP	rmation			
Employer Information High Deductible Health Plan (HDHP) Info Health Plan Selection :Select HDHP Date of Him:	rmation			
Employer Information High Deductible Health Plan (HDHP) Info Health Plan Selection : -Select HDHP Date of Hire: Effective Date of Coverage:	rmation			
Employer Information High Deductible Health Plan (HDHP) Info Health Plan Selection :	rmation			
Employer Information High Deductible Health Plan (HDHP) Info Health Plan Selection : -Select HDHP Date of Hire: Effective Date of Coverage: Statement Delivery: How do you want to receive your Mon	ermation Provement Statements?	Via Online Account Portal Only Via Snall Mail and Online (4 \$2.00 F	ee will be charged to your acco	umt.j

Add Beneficiaries

- Add Primary Beneficiary
- Enter SSN, Name, Address, choose Relationship, and enter Percentage
- If only one primary beneficiary, enter 100% as percentage and click Save
- If you have more than one primary, enter percentage less than 100% and click Save
- Click +Add New Beneficiary to add another primary beneficiary
- Once completed, click **Continue**

Primary	Beneficiaries						
SSN	Name	Address		Relationship		Percentage	Action
SSN	First Name	Street Line	e 1 Street Line 2	Relationship	V	Percenta %	Save Cance
	Middle Inti	al City	State 💟 Zip	-			
	Last Name	United Sta	ates of America	•			

Add Contingent Beneficiary

- Add Contingent Beneficiary
- Enter SSN, Name, Address, choose Relationship, and enter Percentage
- If only one Contingent beneficiary, enter 100% as percentage and click Save
- If you have more than one contingent, enter percentage less than 100% and click Save
- Click +Add New Beneficiary to add another contingent beneficiary
- Once completed, click **Continue**

1.Eligibility	Step 2.0ser	Step 3.Account	Step 4.Primary Beneficiary	Step 5.Contingent Beneficiary	Step 6.Optional Services	7.Review
Continge	ent Beneficia	ries				
SN	Name	Address	0	Relationship	Percentage	Action
SN	First Nan	ne Street I	ine 1 Street Line 2	Relationship 💌	Percenta	Save Cancel
	Middle I	City	State 💟 Zip			
	Last Nam	United	States of America			
Add New Bene	rficiary					

- This page is optional; it's used for setting up a bank account for direct deposits, payroll deductions, and debit cards.
- Click Continue

•

	sation 🗸 Ship 4.3	rimary beneficiar	y Step 5.	Contingent Beneficiary 🖌 Step 6.Optional Services 🗍 🗲 Step 7.Review
Add Optional Services				
You can choose to add the following options or skip this step. If you cho	oose to skip, you ca	n add them later t	through your a	ecount control panel
Direct Distribution and Contribution				
Contribute to your HSA from your personal checking or savings	account.			
L I want to add this				
Payroll Deduction				
Payroll Deduction Centribute to your KSA from your paycheck				
Payroli Deduction Ceditibute to your HSA from your paycheck Event to contribute:	s	Weekly - 52	×	Our Recommendation
I want to add this Payroll Deduction Contribute to your HBA from your paycheck I want to contribute: My Employer is Contribute:	5	Weekly - 52 Weekly - 52	2 2	Our Recommendation Based on the IBS Limit of 5665000, you can contribute an additional

Direct Distribution and Contribution – Enter bank account to use for direct deposit for reimbursements or use for post tax deposits

🖌 Step 1. Eligibility 🖍 Step 2. User Set-up 🖌 Step 3. Account Information 🖋 S	tep 4. Primary Beneficiary 🖌 Step 5. Contingent Beneficiary 🖌 Step 6. Optional Services 🖌 Step 7. Review
Add Optional Services	
ou can choose to add the following options or skip this step. If you choose to skip,	you can add them later through your account control panel
 Direct Distribution and Contribution 	
Contribute to your HSA from your personal checking or savings account.	
☑ I want to add this	
Account Type: Checking Savings	I hereby authorize my Plan Service Provider (PSP) to facilitate Electronic Funds Transfer
Account Number:	(EFT) between my Health Savings Account (HSA) and my Personal Bank Account as
Routing Number:	indicated below. These EFT transactions will be facilitated by the PSP but will be initiated by the Contention SET transactions will be althen a with drawn form any Bennard Real
Bank Name:	Account for subsequent deposit into my HSA or will be a withdrawal from my HSA for
City:	subsequent deposit into my Personal Bank Account.
	1977). Read Renders and Encount Directory are found as your check and not as the descell cline

• **Payroll Deduction** – Use as a calculator to see how much you can do each pay period to meet the IRS Max. This information will not feed to the payroll department at your place of employment

♥ Step 1.Eligibility ♥ Step 2.User Set-up ♥ Step 3.Account Informa	rtion 🛛 🛹 Step 4.3	Primary Beneficiary	Step 5.0	ontingent Beneficiary 🗲 Step 6.Optional Services 🗲 Step 7.Review
Add Optional Services				
You can choose to add the following options or skip this step. If you chor	ose to skip,you ca	n add them later th	arough your a	ccount control panel
 Direct Distribution and Contribution 				
Contribute to your HSA from your personal checking or savings a	iccount.			
I want to add this				
♥ Payroll Deduction				
Payroll Deduction Contribute to your HSA from your paycheck				
Payroll Deduction Contribute to your HSA from your paycheck I want to contribute:	5	Weekly - 52	~	Our Recommendation
Payroll Deduction Contribute to your HSA from your paycheck I want to contribute: My Employer is Contributing:	\$ \$	Weekly - 52 Weekly - 52	> >	Our Recommendation Based on the IRS Limit of \$6650.00, you can contribute an additiona

Debit Card(s) - Order a primary (Card 1) and secondary (Card 2).

- Primary card will default with Account holder's name
- Secondary card can be ordered; enter name for that card in Card 2 field

L.	ant to contribute:	\$ Weekly - S	2 🗸	Our Recommendation
My Employ	er is Contributing:	\$ Weekly-5	2 🗸	Based on the IRS Limit of \$6650.00, you can contribute an addition
Your total payroll co	ntribution will be:	\$0.00		56650.00, swing you an additional 51662.50 in income tax. Increase your annualized payroll deduction amount to 56650.00
Make easy payments from your HSA I accept the terms of the Card Pro	with the mysourceCard [™] , a l gram. View Card Agreement Enter the Name(s) (if ordering only or There is a 21 chara Card 1:	MasterCard® Debit Card to appear on your Debit Ca e card, please use the Card cter maximum, including sp	rd(s) 1 field and leave the aces .	Card 2 field blank.)

- Last Page is **Review The Application**
- Click on the arrows to expand the sections
- Edit any section that needs to be updated
- If all is correct, click I Agree
- Click to view "Custodial Account Agreement"

Click an arrow to view your information. To make any changes, click the Edit This Section link Collapse All Sections	
♥ User Set-up	
◆ Application	
♥ Primary Beneficiaries	
✓Contingent Beneficiaries	
♥ Direct Distribution and Contribution	
▼ Payroll Deduction	
✓ Debit Card(s)	
I have completed this application to establish my individually owned Health Savings Account. The information entered via this online application is true and accurate to the best of my knowledge, and I submit the information with full understanding and acceptance of the provisions contained within the Custodial Account Agreement, HSA. Terms and Conditions Statement, and the HSA. Disclosure Statement, I also acknowledge that the Plan Service Provider (PSP) is authorised to perform transactions for my account and all such transactions initiated by the PSP will be treated as if initiated directly by me, the Account Holder.	

Enrollment Complete Confirmation

Enrolln	hent Complete
Congrat	ulations!
	Jackson Bogart, you have completed enrollment for your HSAToday ^{re} account.
	Check your email for a Confirmation of enrollment containing an Account Activation link. Clicking this link confirms your registration for online access to your Account Portal.
	For general questions about enrollment or health savings accounts please contact your plan service provider:
	DataPath Administrative Sensors, Inc. 1601 Westpark Drive, Suite 9
	Little Rock, AR 72204 T: 877-685-0655
	F: 501-687-3282

Email received after enrolling

• Click on the link to activate the account and to receive the welcome kit

HSA loday	myHSAToday.com Support Login
Enrollment Confirmation	WE RECOMMEND
Hello Holly Golightly,	Maximize your tax
Congratulations! You are receiving this email because you have enrolled into an HSAToday~ account and you have been Approved .	savings now!
Only one more step to complete and you can begin using your	
HSAToday~ account Today!	Account Number
Activate your Account by clicking the link below or cut and paste into your web browser:	5284
https://secure.myrsc.com/hsaenroll/HSAEnrollment/ActivateMyHSA? tempid=CF02AAD5-4249-4C1A-8041-5398697BB9C1	Account Status
	Approved, Not Activated
Support	Contraction of the second s
and the second se	Statements are available
Call your local Plan Service Provider for	online by default. To receive
information regarding this email or your	Statements by mail please call
health savings account:	your PSP.
Demo TPA	
1601 WestPark Drive	
Little Rock72204	
501-687-0000	

Welcome email received after account is activated





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