

ONLINE CLAIM SUBMISSION

Once you sign in to the WealthCare Portal (www.mywealthcareonline.com/murfeemeadows) under “My Accounts” select “Request Reimbursement”.

1. Click the “Add New” button to open the “Add/Edit Claim” page.

Murfee Meadows, Inc.
Administration and Financial Services

My Accounts | Debit Card | Communications | My Profile | Enrollment | Resources

Last Login: 1/15/2014 8:20 AM

Navigation

- Benefit Account Summary
- Benefit Account Details
- Transaction History
- Reimbursement Request**
- Reimbursement Settings
- Pending Claims
- Claims Crossover Preference
- Pay Provider Preference
- Frequently Asked Questions
- Announcements
- Forms & Documents
- Contact Us

Reimbursement Request

Click on the "Add New" button to enter a new claim. If applicable, you also have the option to click on "Edit" on a previously entered claim to make corrections.

New Claims

| Start Date | End Date | Amount | Claimant | Provider | Receipt |
|--|----------|--------|----------|----------|---------|
| <input type="button" value="Add New"/> | | | | | |

Certification:
 I, the undersigned, hereby certify that the above listed expenses have not been previously reimbursed from my Flexible Spending Account, nor are they reimbursable from any other source. I hereby authorize Murfee Meadows, Inc. to obtain necessary information from all physicians, hospitals, day care providers, employers and all other agents in order to adjudicate the claim for reimbursement under the Benefit Plan established by my employer.

Please note: after submitting your claim(s) no edits are allowed.

2. Enter the required fields: “Service Start Date”, “Claim Amount”, and “Claimant”.
3. Optionally, enter the “Service End Date” and “Provider”.
4. Do not change the “Reimbursement Method”.
5. Under “Account Type” select the “Plan Dates” applicable to your claim.
6. Enter any extra fields included in the claim entry template (optional or required).
7. Click the “Browse” button to upload a receipt file.
8. Click “OK”.

Murfee Meadows, Inc.
Administration and Financial Services

My Accounts | Debit Card | Communications | My Profile | Enrollment | Resources

Last Login: 1/15/2014 8:20 AM

Navigation

- Benefit Account Summary
- Benefit Account Details
- Transaction History
- Reimbursement Request**
- Reimbursement Settings
- Pending Claims
- Claims Crossover Preference
- Pay Provider Preference
- Frequently Asked Questions
- Announcements
- Forms & Documents
- Contact Us

Reimbursement Request

Add/Edit Claim

Please complete the requested data below and click on OK upon completion.

Service Dates: Start Date: [] End Date: []

Claim Amount *: \$ []

Claimant *: Test, T []

Reimbursement Method: Check []

Provider: []

Account Type: --Select One-- []

Receipt File: []

Notes: []

* = required

9. Enter any additional claims by clicking the “Add New” button.
10. Check the certification check box.
11. Click the Submit button.

The screenshot shows a web browser window with the URL <https://www.myhealthcareonline.com/murfeemeadows/MyAccounts/ReimbursementRequest>. The page title is "Reimbursement Request" and the user is logged in as "Last Login: 1/15/2014 8:20 AM".

The page features a navigation menu on the left with the following items: Benefit Account Summary, Benefit Account Details, Transaction History, Reimbursement Request (highlighted), Reimbursement Settings, Pending Claims, Claims Crossover Preference, Pay Provider Preference, Frequently Asked Questions, Announcements, Forms & Documents, and Contact Us.

The main content area is titled "Reimbursement Request" and includes the following text: "Click on the 'Add New' button to enter a new claim. If applicable, you also have the option to click on 'Edit' on a previously entered claim to make corrections."

Below this text is a table titled "New Claims" with the following data:

| Start Date | End Date | Amount | Claimant | Provider | Receipt |
|------------|-----------|---------|----------|----------|---------|
| 2/14/2014 | 2/14/2014 | \$10.00 | Test, T | | Edit |

Below the table is an "Add New" button.

The "Certification" section contains a checkbox and the following text: "I, the undersigned, hereby certify that the above listed expenses have not been previously reimbursed from my Flexible Spending Account, nor are they reimbursable from any other source. I hereby authorize Murfee Meadows, Inc. to obtain necessary information from all physicians, hospitals, day care providers, employers and all other agents in order to adjudicate the claim for reimbursement under the Benefit Plan established by my employer."

At the bottom of the form, there is a "Please note: after submitting your claim(s) no edits are allowed." and two buttons: "Submit" and "Clear".

12. View Receipt Submit Form and print for your records.

Note: If you do not “Submit”, all entered information will be lost. Claims may be edited until the “Submit” button is clicked. After that, the claim can no longer be edited.

You can also e-mail your receipt(s) to claims@murfeemeadows.com