CoAd.PAY
A CoAd Affiliate

Understanding Your Benefits Debit Card

FSA · HRA · HSA

A simple guide to using your card, responding to letters, and keeping your account active.

Who is this guide for?

This guide is for anyone who received a CoAd.PAY Benefits Debit Card from their employer — regardless of account type (FSA, HRA, or HSA).

The debit card process — how transactions are reviewed, what letters you receive, and how to respond — works the same way for all account types. The only difference is what document you need to submit, which is covered in Section 4.

⚠ **HRA participants note:** This guide covers your debit card transactions only. Some HRA plans also allow expenses to be submitted manually (without using the card) — that process is separate. Check with your employer or your plan documents to understand what your plan covers.

First things first: set up your online account

Before you do anything else, you need to create your online account. This is where you will see all your transactions, receive notifications, and upload documents when needed.

Go to https://prpppt.lh1ondemand.com/Login.aspx

- Click **"Get Started"** and complete your registration.
- Once registered, check the **Tasks** section for anything that needs your attention.
- You can also use the mobile app to upload documents quickly.

How does my card work?

Your benefits debit card lets you pay directly for eligible healthcare expenses like doctor visits, prescriptions, eye care, and more. Think of it like a normal debit card, but it only works for approved medical expenses.

Here is what happens after every purchase:

1 **You swipe your card**
You pay for healthcare expenses at the doctor, pharmacy, or other provider.

2 **The transaction is reviewed automatically**

Transactions at medical offices, pharmacies, and certain recognized providers are often approved automatically — no action needed from you. But sometimes the system needs a little more proof that the purchase was for an eligible expense.

3 **You may receive a request for documentation**

If your transaction needs to be reviewed, you will get a notification by email **and** in your online account. This does **not** mean you did anything wrong — it just means we need a receipt or document to confirm eligibility.

4 **You upload your documentation**

Log in to your account, go to the **Tasks** section, and upload the required document. The type of document depends on your account type (FSA or HRA) — see Section 4 below.

5 **Your transaction is approved!**

Once your document is reviewed and accepted, the transaction is marked as complete. If your card was temporarily shut off, it will be turned back on.

What happens if I don't respond? (The notice timeline)

If you don't upload documentation after your first request, we will send you reminders. Here is the order of what happens:

Transaction Made	1st Notice	2nd Notice	3rd Notice (Final)	Card Shut Off
You swipe your card	~5 days later · 14 days to respond	35 days later · 10 days to respond	35 days later · 10 days to respond	Auto-deny + repayment required

! **Important:** Respond as quickly as possible to avoid losing access to your card.

- Each notice gives you a deadline to upload your documents or repay the transaction.
- After the final notice, your card will be shut off, and the transaction will be marked ineligible.
- You will then be required to repay the amount to keep your account in good standing.

What do I need to submit?

The document you need depends on what type of benefits account you have. Check the table below:

FSA Card

Submit an Itemized Receipt that shows:

- ✓ Patient name
- ✓ Date of service
- ✓ Provider name
- ✓ Description of service
- ✓ Your out-of-pocket cost

- ⊘ Credit card receipts are **not** accepted.
- ⊘ Service estimates are **not** accepted.

HRA Card

Submit an Explanation of Benefits (EOB).

Your EOB comes from your health insurance company after a claim is processed. It shows what your plan paid and what you owe — this is exactly what we need!

Call your insurance company if you need help getting your EOB.

⚠ **HRA plans vary:** Please review your plan documents to understand what expenses are permissible under your specific plan.

Not sure what kind of account you have? Log in to your portal or call us at **855-892-6272** and we'll help you figure it out.

My card was shut off — how do I turn it back on?

Don't panic! Here is exactly what to do:

1. **Log in to your account**
   Go to https://prpppt.lh1ondemand.com/Login.aspx and sign in.

2. **Go to your Tasks section**
   Find the transaction that was flagged. It will show you exactly what is needed.

3. **Choose one of two options**

   OPTION A
   Upload your documentation (receipt or EOB) directly to the claim.

   OPTION B
   Repay the transaction amount through the portal (by ACH) or by check payable to your employer.

4. **Your card is restored**
   Once all flagged transactions are resolved, your card will be turned back on. No call is needed! *Note: If you repaid a transaction, allow 5–7 business days for the payment to clear before your card is reactivated.*

Quick tips to avoid problems

- ☆ **Ask for and save your itemized receipts!** Take a photo right after every purchase.
- ☆ **HRA users:** Request your Explanation of Benefits (EOB) from your insurance company after every claim.
- ☆ **Check your email regularly** — notices are sent there and are time-sensitive.
- ☆ **Log in to your portal often** to check the Tasks section for anything needing attention.
- ☆ **Respond quickly** — the sooner you upload, the faster your transaction clears!

Do not submit a plain credit card receipt or bank statement. These will be rejected.

The CoAd.PAY Benefits App

The CoAd.PAY Benefits mobile app lets you handle everything on the go — check your balance, upload receipts the moment you leave the doctor, and get notified instantly when action is needed on your account.

APPLE Apple App Store **Search: PrimePayBenefits**

Google Play Store **Search: PrimePayBenefits**

Search for **PrimePayBenefits** in either app store. It's free to download.

Here is what you can do in the app:

- Upload receipts & EOBs instantly from your camera or photo library
- View your account balance in real time
- Get notifications when a receipt is needed — and respond right away
- Scan a product barcode to check if it's HSA/FSA eligible before you buy
- View your claims history and payment status
- Report a lost or stolen card and request a replacement
- Set up direct deposit for fast reimbursements
- Download plan documents and forms

The most important feature: upload a receipt right from your phone

Got an email asking for documentation? You can respond in under a minute from your phone:

1. Open the app and look at your **Home Page**.
2. Tap the **Action Required** task in the Tasks section.
3. Select the claim that needs a receipt.
4. Tap **New Receipt —** then take a photo or choose one from your gallery.
5. **Done!** Your receipt is submitted instantly.

Set up notifications so you never miss a request

The app will alert you any time a receipt or document is needed for your debit card. To turn on notifications:

1. Tap the **Profile** icon at the bottom of the app.
2. Tap **Notification Preferences**.
3. Turn on the alerts you want — we recommend turning them **all** on!

This way, you will get a push notification the moment something needs your attention, so you can respond fast and keep your card active.

Need help? Contact PrimeFlex Support

PHONE	EMAIL	HOURS
855-892-6272	primeflex@primepay.com	Mon–Fri, 8AM–7PM ET

primepay.com/login — Choose **Benefit Portal** under Employee Access! Log in any time to check your account, upload documents, or make a repayment.