

TexFlex online claim submission guide

TEXFLEXSM
PAYFLEX[®]



TexFlex online claim submission guide

How to submit eligible claims to PayFlex

This guide provides you with helpful information related to your TexFlex flexible spending account (FSA). Whether you need to pay yourself back or pay a provider from your TexFlex account funds, you can easily submit your claims online via the TexFlex member website – www.TexFlexERS.com.

Read through this guide for step-by-step instructions on how to file your eligible claims and upload proper documentation. This guide includes 2 sections:

- How to file a claim by sending payment to yourself
- How to file a claim by sending payment to a provider

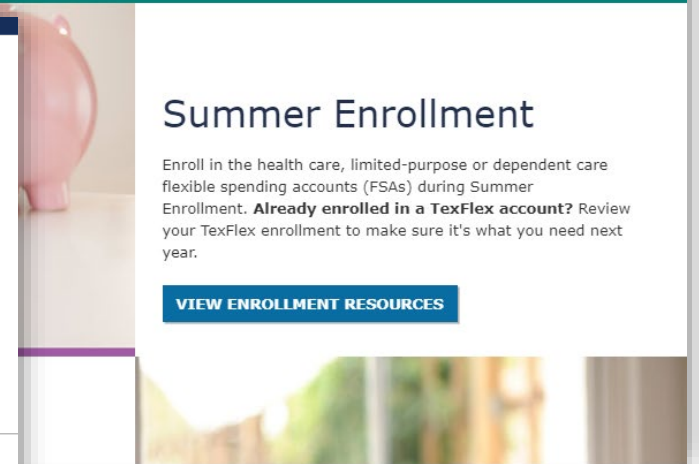
Keep in mind, your claim **must include** supporting documentation. The preferred type of supporting document for a health care or limited-purpose claim is an explanation of benefits (EOB) from your medical, dental or vision coverage carrier. For dependent care, or if you don't have an EOB, you can send a detailed receipt or statement that includes the following:

- Date of service
- Final amount you had to pay
- Description of service/item received
- Name of merchant or provider
- Name of patient (if applicable)

Your TexFlex account member website

www.TexFlexERS.com

1. Visit **www.TexFlexERS.com**.
2. Click **LOGIN** at the top of your screen.
3. Enter your username and password, then select **LOGIN**.
4. If this is your first-time logging in, select **CREATE PROFILE** to register your account.

This screenshot shows the 'Select your secure login' page. On the left, there are three login options: 'Member >' (highlighted in red), 'Employer', and 'Broker/Consultant'. The 'Member Login' section in the center contains a 'USERNAME' field with the placeholder 'Enter your username', a 'PASSWORD' field with the placeholder 'Enter your password' and an eye icon, and a red 'LOGIN' button circled in red. Below the password field are links for 'Forgot username?' and 'Forgot password?'. To the right of the login fields, there is a 'New to PayFlex?' section with the text 'Create an online profile to manage your PayFlex account.' and a teal 'CREATE PROFILE' button circled in red. At the bottom right, there is a 'Trouble logging in?' section with contact information: 'Call us at 1-855-542-6183 (TTY: 711). We're here to help Monday through Friday, 7 AM to 7 PM CT and Saturday, 9 AM to 2 PM CT.'

After you log into www.TexFlexERS.com, you'll see your account dashboard.

- Scroll to the TexFlex account you wish to submit a claim for.
- Click **File a claim** under *Account Actions*.

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Home Help & Support Account Settings Logout

Your Accounts Alerts & News Health Plan Claims (3) Documents & Forms

Hello, JASON

Dependent Care
9/1/2020 - 8/31/2021 Change Plan Year
Employees Retirement System of Texas

\$2,815⁰¹ available funds
\$2,815.01 available funds

Annual election \$5,000.00
Deposits \$2,625.00
Spent Funds (\$190.01)

Last day to spend funds November 15, 2021
Last day to file claims December 31, 2021

Account Actions
View account details >
File a claim >
Link a bank account >
Set up account notifications >

Quick Tips
Explore eligible expenses. Find out what you can pay for with your PayFlex account.

Healthcare (FSA)
9/1/2020 - 8/31/2021 Change Plan Year
Employees Retirement System of Texas

Urgent action needed

\$2,525⁰¹ available funds
\$2,525.01 available funds \$174.99 spent funds

Annual election \$2,500.00
Remaining carryover amount \$25.01
Spent Funds \$174.99

Last day to spend funds August 31, 2021
Last day to file claims December 31, 2021

Account Actions
View account details >
File a claim >
Link a bank account >
Set up account notifications >

Quick Tips
Explore eligible expenses. Find out what you can pay for with your PayFlex account.
Your employer allows you to carry over all your unused funds into the next plan year.

Tell us about your request

After you click **file a claim**, select your expense type.

- Enter the amount and date of your expense.
- Click **Continue**.

Then, you'll have a chance to edit, or remove your expense, or add another expense. When you are all set, you can click **Continue**.

Request funds – File a claim

1 Tell us about your request

*Indicates a required field

Expense type*

Medical

Amount*

Enter dollar amount

Date of expense* ?

MM/DD/YYYY

CONTINUE

2 Where should we send your funds?

3 How will you send your documents to us?

4 Confirm and submit

Request funds – File a claim

1 Tell us about your request

Expense type	Amount	Expense date	Name	Edit	Remove
Medical	\$50.00	12/18/2019 - 12/18/2019			

ADD ANOTHER EXPENSE **CONTINUE**

2 Where should we send your funds?

3 How will you send your documents to us?

4 Confirm and submit

Where should we send your funds?

Choose where to send your funds, you have 2 options:

- Pay yourself back by selecting **Send me a check** (see page 7), or you can
- Send funds to a provider by selecting **Send funds to someone else** (see page 14)

1 Tell us about your request

2 Where should we send your funds?

Choose one of the options below.

☐ Link a bank account - it helps you get your funds faster!

☐ Send me a check

☐ Send funds to someone else

CONTINUE

3 How will you send your documents to us?

4 Confirm and submit



How to send payment to yourself

How do you want to get paid?

When it comes to paying yourself back, you can have funds reimbursed directly into your checking/savings account (also known as direct deposit), or you can have a check mailed to you.

- Select **Send me a check** to get a paper check in the mail.
- If you want funds deposited into your bank account, you need to first need to link a bank account. Click **Link a bank account** to set up your account for faster payments.
- When you've made your selection, click **Continue**.

The screenshot shows a multi-step form. Step 1 is 'Tell us about your request'. Step 2 is 'Where should we send your funds?' and is highlighted with a light pink background. It contains the instruction 'Choose one of the options below.' and three radio button options: 'Link a bank account - it helps you get your funds faster!', 'Send me a check', and 'Send funds to someone else'. The first option is circled in red. Below the options is a blue 'CONTINUE' button. Step 3 is 'How will you send your documents to us?' and Step 4 is 'Confirm and submit'.

1 Tell us about your request

2 Where should we send your funds?

Choose one of the options below.

☒ Link a bank account - it helps you get your funds faster!

☐ Send me a check

☐ Send funds to someone else

CONTINUE

3 How will you send your documents to us?

4 Confirm and submit

How will you send your documents to us?

You must always include supporting documentation when filing a claim. You have 2 options:

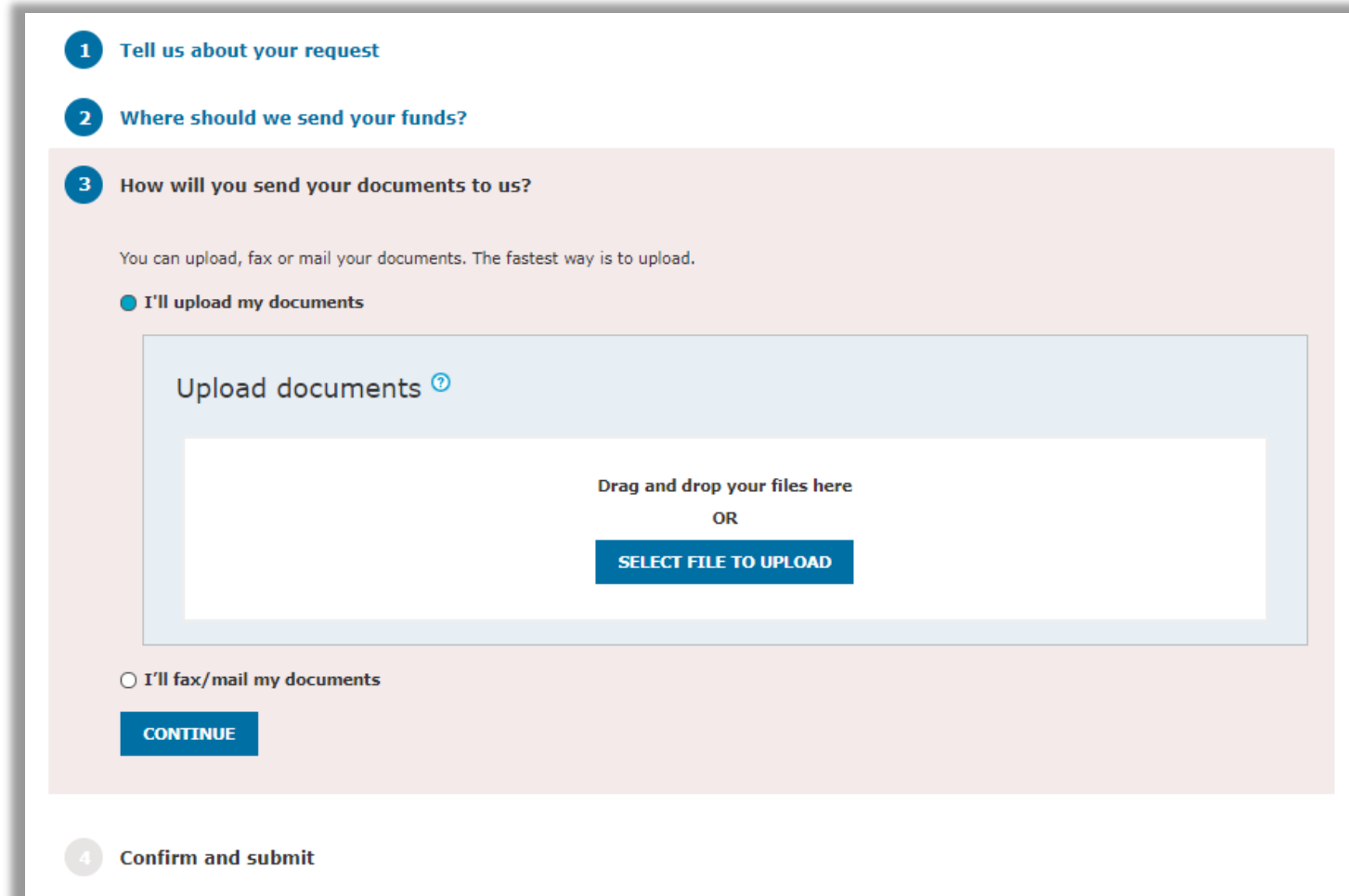
- You can choose to upload your documents, or you can
- Fax or mail your documents

If you want to upload, select ***I'll upload my documents.***

- Then, click **Select File to Upload** or drag and drop into the white box.
- Then click **Continue.**

Quick tip:

You can upload documents in JPG, PNG, GIF or PDF. The total size limit is 10MB.



The screenshot shows a web form with four steps. Step 3, 'How will you send your documents to us?', is highlighted in a light pink background. It contains a radio button selection for 'I'll upload my documents', which is selected. Below this is a light blue box with the text 'Upload documents' and a question mark icon. Inside this box is a white area with the text 'Drag and drop your files here' and 'OR' above a blue button labeled 'SELECT FILE TO UPLOAD'. Below the blue box is another radio button for 'I'll fax/mail my documents', which is unselected, followed by a blue button labeled 'CONTINUE'. Step 4, 'Confirm and submit', is visible at the bottom of the form.

1 Tell us about your request

2 Where should we send your funds?

3 How will you send your documents to us?

You can upload, fax or mail your documents. The fastest way is to upload.

☒ I'll upload my documents

Upload documents ?

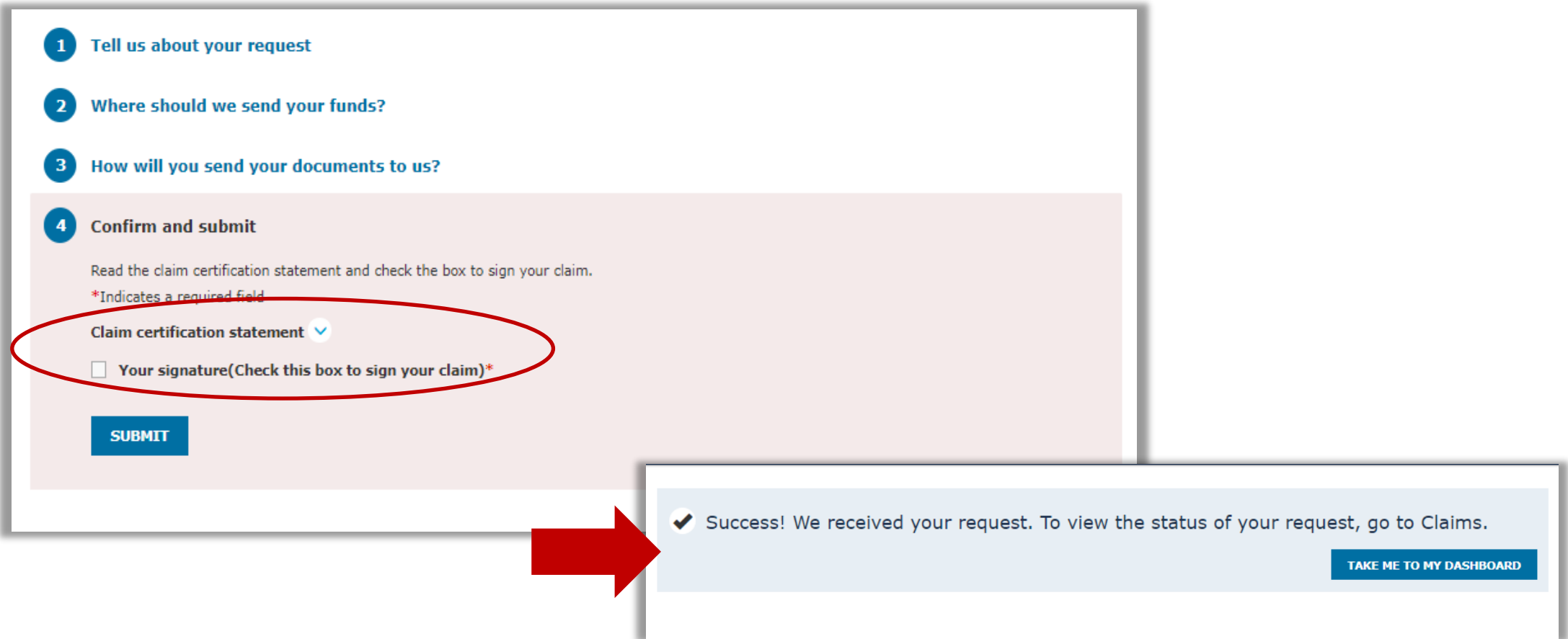
Drag and drop your files here
OR
SELECT FILE TO UPLOAD

☐ I'll fax/mail my documents

CONTINUE

4 Confirm and submit

Select the drop-down arrow to review the claim certification statement. Then, check the box to sign your claim. Click **Submit**. When your claim submission is successful, you'll see a success message.



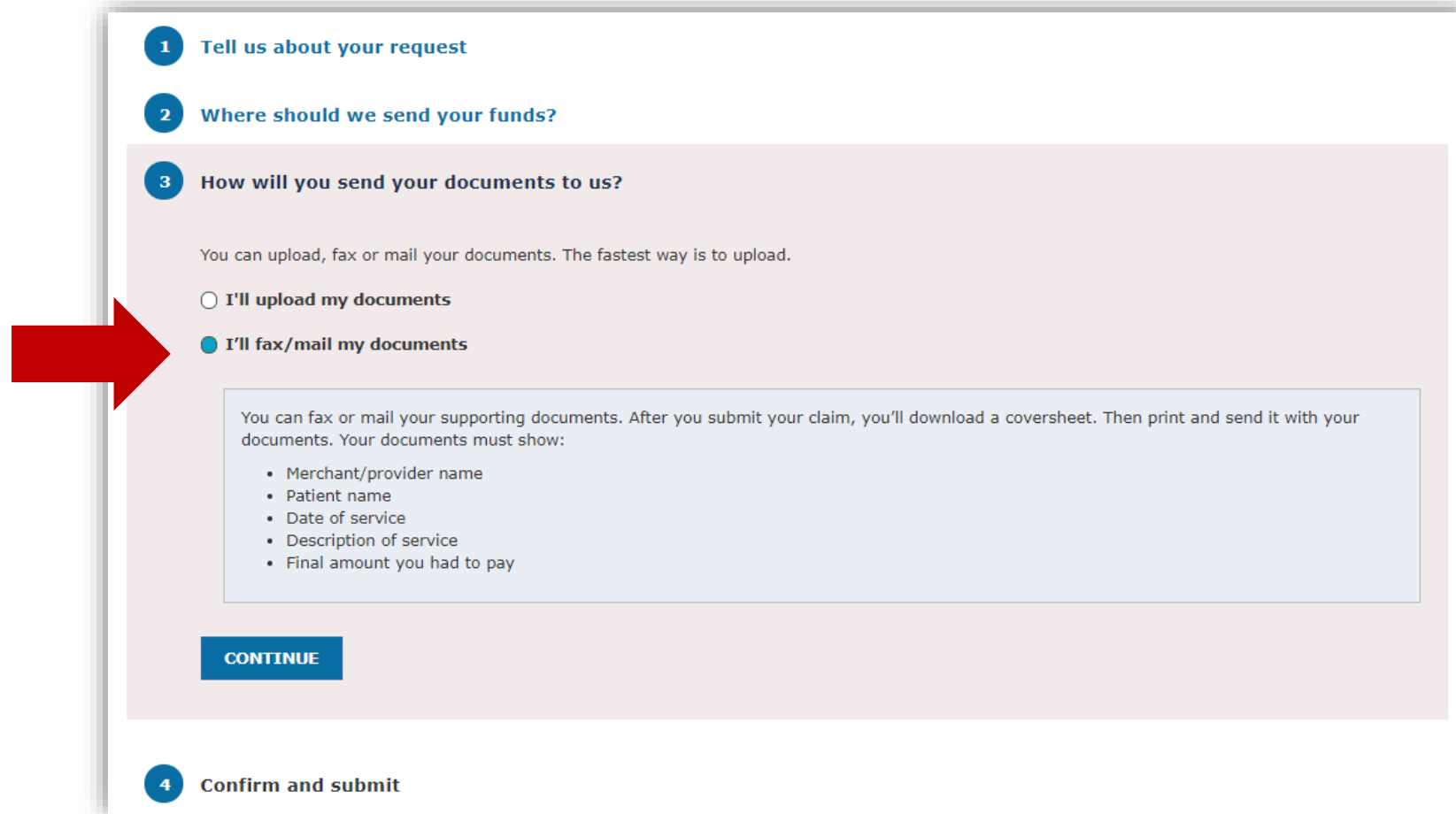
The image shows a multi-step form for claim submission. The steps are:

- 1 Tell us about your request
- 2 Where should we send your funds?
- 3 How will you send your documents to us?
- 4 Confirm and submit

Step 4 is highlighted with a light pink background. It contains the text: "Read the claim certification statement and check the box to sign your claim." and a note: "*Indicates a required field". Below this, there is a dropdown menu labeled "Claim certification statement" with a blue arrow icon, which is circled in red. Underneath the dropdown is a checkbox labeled "Your signature(Check this box to sign your claim)*". A blue "SUBMIT" button is located at the bottom left of the form.

A red arrow points from the "SUBMIT" button to a success message box that appears below the form. The success message box has a light blue background and contains a checkmark icon, the text "Success! We received your request. To view the status of your request, go to Claims.", and a blue button labeled "TAKE ME TO MY DASHBOARD".

If you don't want to upload your documents, select **I'll fax/mail my documents** on this page. Then click **Continue**. Keep in mind, after you submit your claim, you'll download a coversheet to print/send.



1 Tell us about your request

2 Where should we send your funds?

3 How will you send your documents to us?

You can upload, fax or mail your documents. The fastest way is to upload.

☐ I'll upload my documents

☒ I'll fax/mail my documents

You can fax or mail your supporting documents. After you submit your claim, you'll download a coversheet. Then print and send it with your documents. Your documents must show:

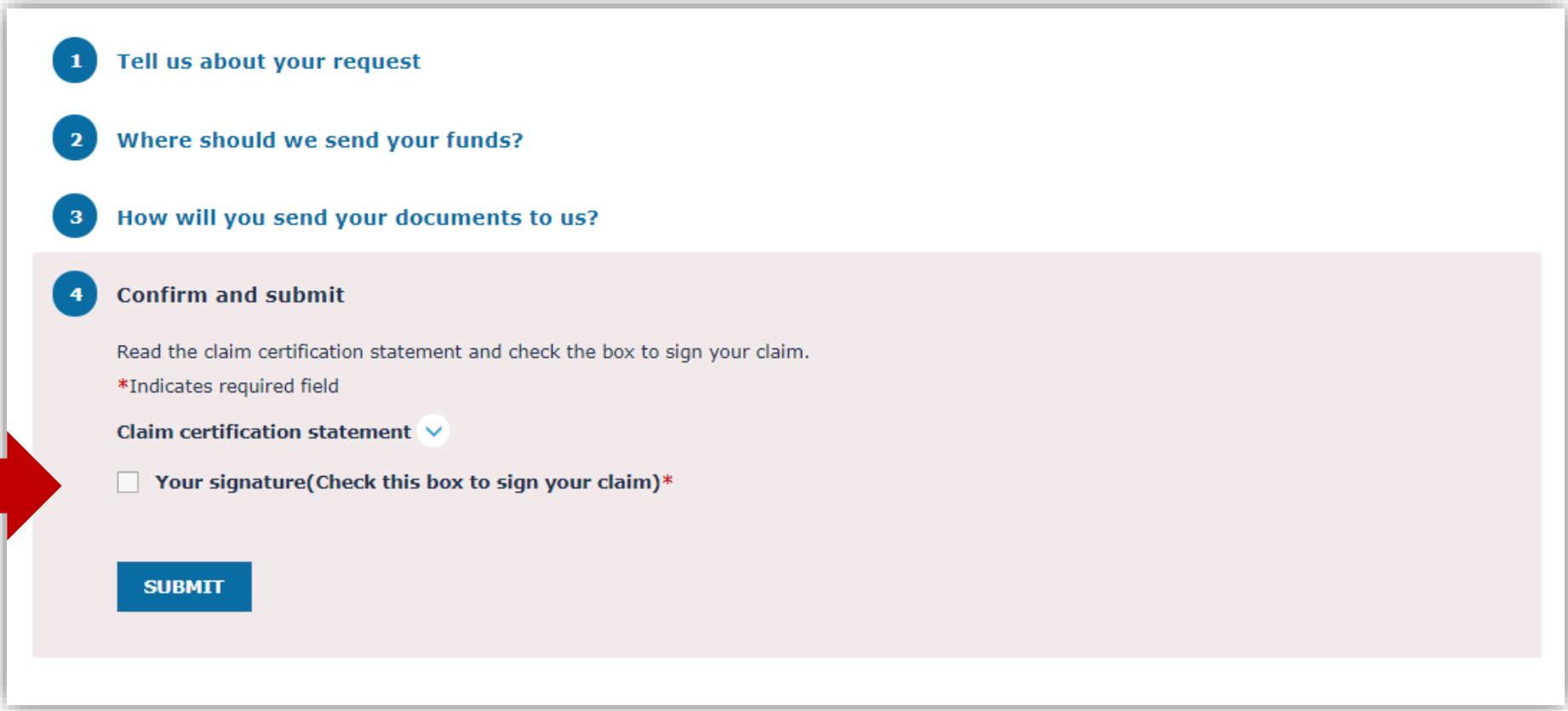
- Merchant/provider name
- Patient name
- Date of service
- Description of service
- Final amount you had to pay

CONTINUE

4 Confirm and submit

Confirm and submit your claim

- Select the drop-down arrow to review the claim certification statement.
- Then, check the box to sign your claim.
- Click **Submit**.



1 Tell us about your request

2 Where should we send your funds?

3 How will you send your documents to us?

4 Confirm and submit

Read the claim certification statement and check the box to sign your claim.

*Indicates required field

Claim certification statement ▼

☐ Your signature(Check this box to sign your claim)*

SUBMIT

Download your coversheet

Once your claim is successfully submitted, you need to download/print a coversheet. Click **Download Coversheet**. Then, fax or mail the coversheet, along with your supporting documents.

Here is your TexFlex information

Fax to: (402) 231-4310

Mail to: PO BOX 8396, Omaha, NE 68108-0396



Success! We received your request. But we need your supporting documents.

1. Download and print your coversheet.
2. Fax or mail your coversheet and supporting documents. [?](#)
3. To view the status of your request, go to Claims.

[TAKE ME TO MY DASHBOARD](#)

[DOWNLOAD COVERSHEET](#)



How to send payment to your provider

After you log into www.TexFlexERS.com, you'll see your account dashboard.

- Scroll to the TexFlex account you wish to submit a claim for.
- Click **File a claim** under *Account Actions*.

PAYFLEX® Home Help & Support Account Settings Logout

Your Accounts Alerts & News Health Plan Claims (3) Documents & Forms

Hello, JASON **TEXFLEX™**

Dependent Care

9/1/2020 - 8/31/2021 [Change Plan Year](#)

Employees Retirement System of Texas

\$2,815⁰¹ available funds ⓘ

\$2,815.01 available funds

Annual election ⓘ \$5,000.00

Deposits ⓘ \$2,625.00

Spent Funds ⓘ (\$190.01)

Last day to spend funds ⓘ November 15, 2021

Last day to file claims ⓘ December 31, 2021

Account Actions

- [View account details >](#)
- [File a claim >](#)
- [Link a bank account >](#)
- [Set up account notifications >](#)

Quick Tips

Explore eligible expenses. Find out what you can pay for with your PayFlex account.

Healthcare (FSA)

9/1/2020 - 8/31/2021 [Change Plan Year](#)

Employees Retirement System of Texas

\$2,525⁰¹ available funds ⓘ

\$2,525.01 available funds

\$174.99 spent funds

Annual election ⓘ \$2,500.00

Remaining carryover amount ⓘ \$25.01

Spent Funds ⓘ \$174.99

Last day to spend funds ⓘ August 31, 2021

Last day to file claims ⓘ December 31, 2021

Urgent action needed ⓘ

Account Actions

- [View account details >](#)
- [File a claim >](#)
- [Link a bank account >](#)
- [Set up account notifications >](#)

Quick Tips

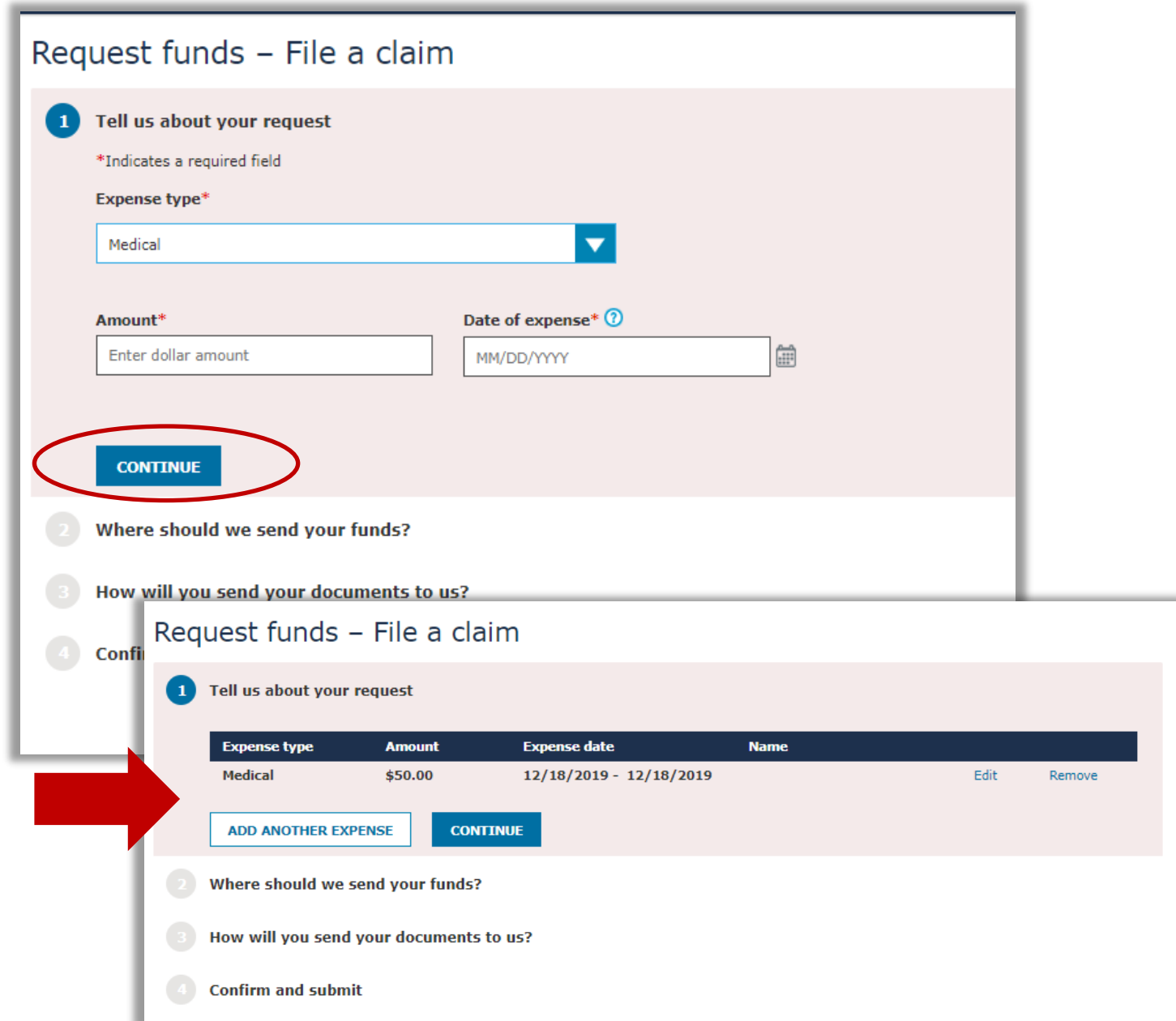
Explore eligible expenses. Find out what you can pay for with your PayFlex account.

Your employer allows you to carry over all your unused funds into the next plan year. ⓘ

Tell us about your request

- After you click **file a claim**, select your expense type.
- Enter the amount and date of your expense.
- Click **Continue**.

Then, you'll have a chance to edit, or remove your expense, or add another expense. When you are all set, you can click **Continue**.



Request funds – File a claim

1 Tell us about your request

*Indicates a required field

Expense type*

Medical

Amount*

Enter dollar amount

Date of expense* ?

MM/DD/YYYY

CONTINUE

2 Where should we send your funds?

3 How will you send your documents to us?

4 Confirm and submit

Request funds – File a claim

1 Tell us about your request

Expense type	Amount	Expense date	Name	
Medical	\$50.00	12/18/2019 - 12/18/2019		Edit Remove

ADD ANOTHER EXPENSE CONTINUE

2 Where should we send your funds?

3 How will you send your documents to us?

4 Confirm and submit

Where should we send your funds?

- Choose where to send your funds.
- To pay a provider, select **Send funds to someone else**.
- Then choose your recipient or click the (+) icon to add a new one.
- Click **Continue**.

1 Tell us about your request

2 Where should we send your funds?

Choose one of the options below.

☐ Send funds to my bank account

☒ Send funds to someone else

Select a recipient or add a new one.

Recipient name

Select a recipient

+ Add a new recipient

CONTINUE

3 How will you send your documents to us?

4 Confirm and submit

After you select or add your recipient, you need to add payment information.

- This includes your contact phone number, statement date, account/invoice number and the name of the person who received the care/service.
- You can also add comments for your provider to help ensure they apply the payment correctly.
- When finished, select **ADD**.

1 Tell us about your request

2 Where should we send your funds?

Choose one of the options below.

☐ Send funds to my bank account

☒ Send funds to someone else

Select a recipient or add a new one.

Recipient name

Dr. Davis

+

Add a new recipient

Dr. Davis

123 MAIN STREET

HARTFORD, CT 06111

Edit

Additional payment information

Complete the fields below. We'll include this information with the payment to your provider.

*Indicates required field

Your contact number*

123-456-7890

Statement date

MM/DD/YYYY

Account/Invoice number

Enter account or invoice number

100 characters max

Who received the care/services?*

Enter a name

100 character limit

Comments

Enter any comments or notes about your payment

250 character limit

ADD

Review the recipient's information.

- If everything looks good, click **Continue**.
- You can also click **Edit** to make changes.
- When you're all set, click **Continue**.

The screenshot shows a multi-step form titled 'Where should we send your funds?'. It includes a dropdown menu for 'Recipient name' with 'Dr. Davis' selected, an 'Add a new recipient' button, and a detailed view of the selected recipient's address and payment information. A 'CONTINUE' button is at the bottom of the form area. Below the form, a progress bar shows four steps: 'Tell us about your request', 'Where should we send your funds?' (current), 'How will you send your documents to us?', and 'Confirm and submit'.

1 Tell us about your request

2 Where should we send your funds?

Choose one of the options below.

☐ Send funds to my bank account

☒ Send funds to someone else

Select a recipient or add a new one.

Recipient name

Dr. Davis ▼

+ Add a new recipient

Dr. Davis Edit
123 MAIN STREET
HARTFORD, CT 06111

Additional payment information Edit

Contact Number: 123-456-7890
Statement Date:
Account/Invoice number:
Who is the care/service for: George
Comments:

CONTINUE

3 How will you send your documents to us?

4 Confirm and submit

How will you send your documents to us?

You must always include supporting documentation when filing a claim. You have 2 options:

- You can choose to upload your documents, or you can
- Fax or mail your documents

If you want to upload, select **I'll upload my documents**.

- Then, click **Select File to Upload** or drag and drop into the white box.
- Then click **Continue**.

Quick tip:

You can upload documents in JPG, PNG, GIF or PDF. The total size limit is 10MB.

The screenshot shows a four-step process for filing a claim. Step 1 is 'Tell us about your request'. Step 2 is 'Where should we send your funds?'. Step 3, 'How will you send your documents to us?', is the active step and is highlighted with a light pink background. It contains a sub-header 'You can upload, fax or mail your documents. The fastest way is to upload.' and two radio button options: 'I'll upload my documents' (selected) and 'I'll fax/mail my documents'. The 'I'll upload my documents' option leads to a light blue box with the title 'Upload documents' and a question mark icon. Inside this box is a large white area with the text 'Drag and drop your files here' and 'OR' above a blue button labeled 'SELECT FILE TO UPLOAD'. Below the white box is the 'I'll fax/mail my documents' option. A blue 'CONTINUE' button is located at the bottom of the pink section. Step 4, 'Confirm and submit', is partially visible at the bottom.

1 Tell us about your request

2 Where should we send your funds?

3 How will you send your documents to us?

You can upload, fax or mail your documents. The fastest way is to upload.

☒ I'll upload my documents

Upload documents ?

Drag and drop your files here

OR

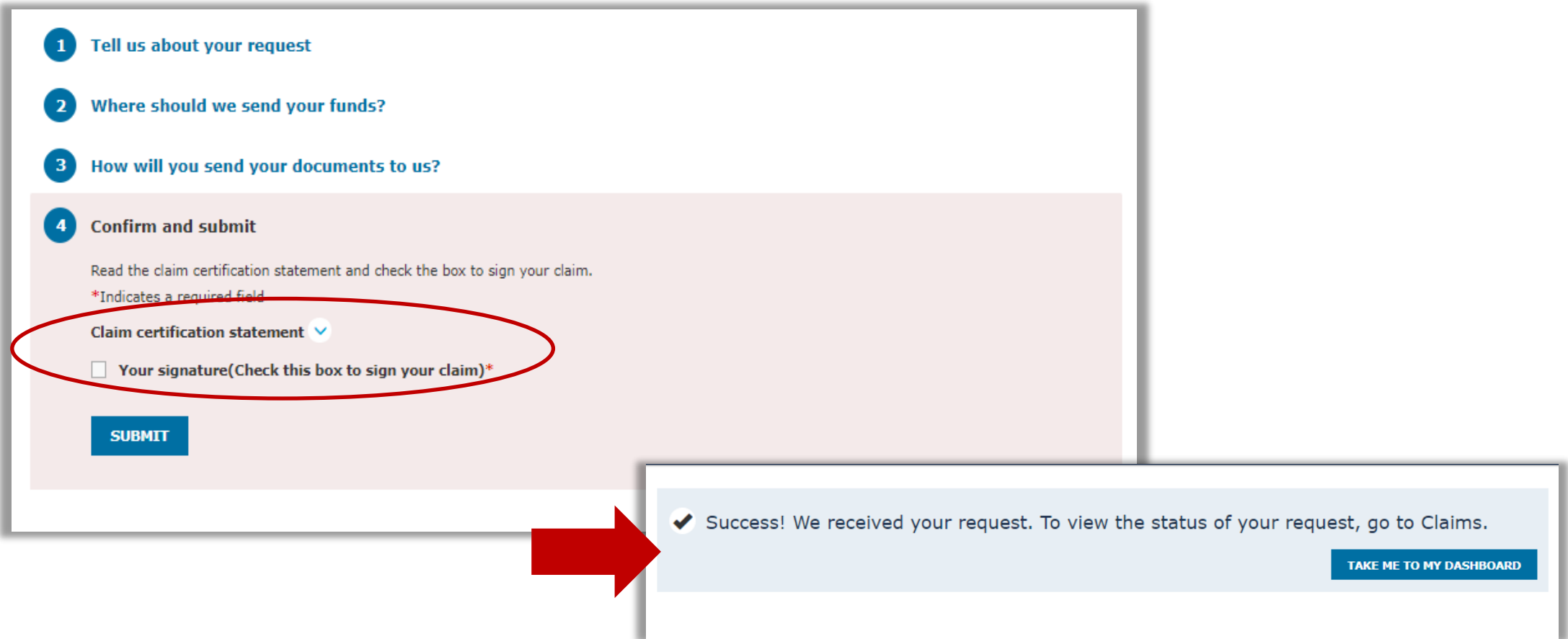
SELECT FILE TO UPLOAD

☐ I'll fax/mail my documents

CONTINUE

4 Confirm and submit

Select the drop-down arrow to review the claim certification statement. Then, check the box to sign your claim. Click **Submit**. When your claim submission is successful, you'll see a success message.



The image shows a multi-step form for submitting a claim. The steps are numbered 1 through 4. Step 4, 'Confirm and submit', is highlighted with a light pink background. In this step, there is a text prompt 'Read the claim certification statement and check the box to sign your claim.' followed by a red asterisk and the text '*Indicates a required field'. Below this, there is a label 'Claim certification statement' with a blue downward arrow icon, which is circled in red. Underneath the label is a checkbox labeled 'Your signature(Check this box to sign your claim)*'. At the bottom left of the form is a blue 'SUBMIT' button. A large red arrow points from the 'SUBMIT' button to a success message box on the right. The success message box has a light blue background and contains a checkmark icon, the text 'Success! We received your request. To view the status of your request, go to Claims.', and a blue button labeled 'TAKE ME TO MY DASHBOARD'.

1 Tell us about your request

2 Where should we send your funds?

3 How will you send your documents to us?

4 Confirm and submit

Read the claim certification statement and check the box to sign your claim.

*Indicates a required field

Claim certification statement ▼

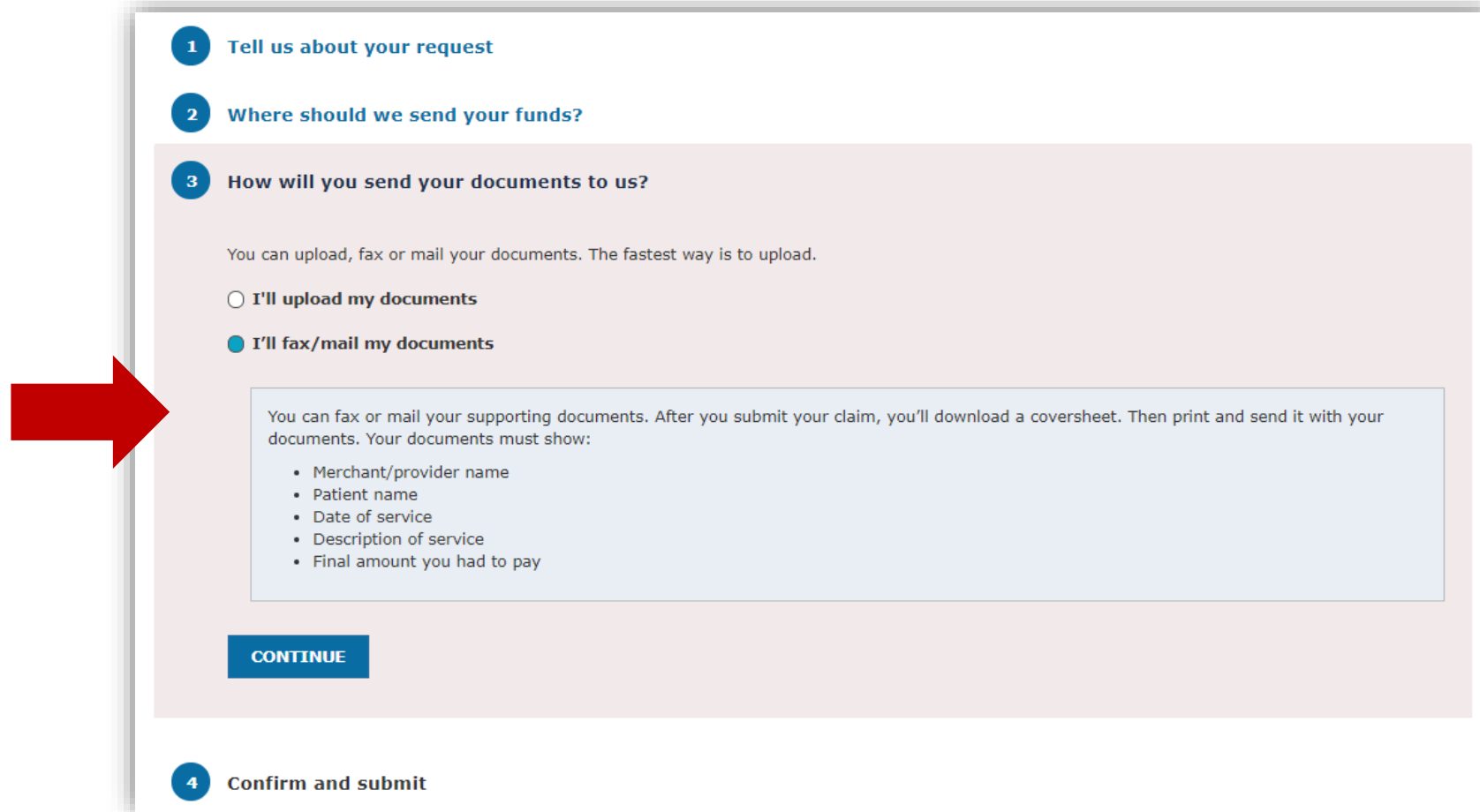
☐ Your signature(Check this box to sign your claim)*

SUBMIT

✓ Success! We received your request. To view the status of your request, go to Claims.

TAKE ME TO MY DASHBOARD

If you don't want to upload your documents, select **I'll fax/mail my documents**. Then click **Continue**. Keep in mind, after you submit your claim, you'll download a coversheet to print/send.



1 Tell us about your request

2 Where should we send your funds?

3 How will you send your documents to us?

You can upload, fax or mail your documents. The fastest way is to upload.

☐ I'll upload my documents

☒ I'll fax/mail my documents

You can fax or mail your supporting documents. After you submit your claim, you'll download a coversheet. Then print and send it with your documents. Your documents must show:


- Merchant/provider name
- Patient name
- Date of service
- Description of service
- Final amount you had to pay

CONTINUE

4 Confirm and submit

Confirm and submit your claim

- Select the drop-down arrow to review the claim certification statement.
- Then, check the box to sign your claim.
- Click **Submit**.



1 Tell us about your request

2 Where should we send your funds?

3 How will you send your documents to us?

4 **Confirm and submit**

Read the claim certification statement and check the box to sign your claim.

*Indicates required field

Claim certification statement ▼

☐ Your signature(Check this box to sign your claim)*

SUBMIT

Download your coversheet

Once your claim is successfully submitted, you need to download/print a coversheet. Click **Download Coversheet**. Then, fax or mail the coversheet, along with your supporting documents.

Here is your TexFlex information

Fax to: (402) 231-4310

Mail to: PO BOX 8396, Omaha, NE 68108-0396



Success! We received your request. But we need your supporting documents.

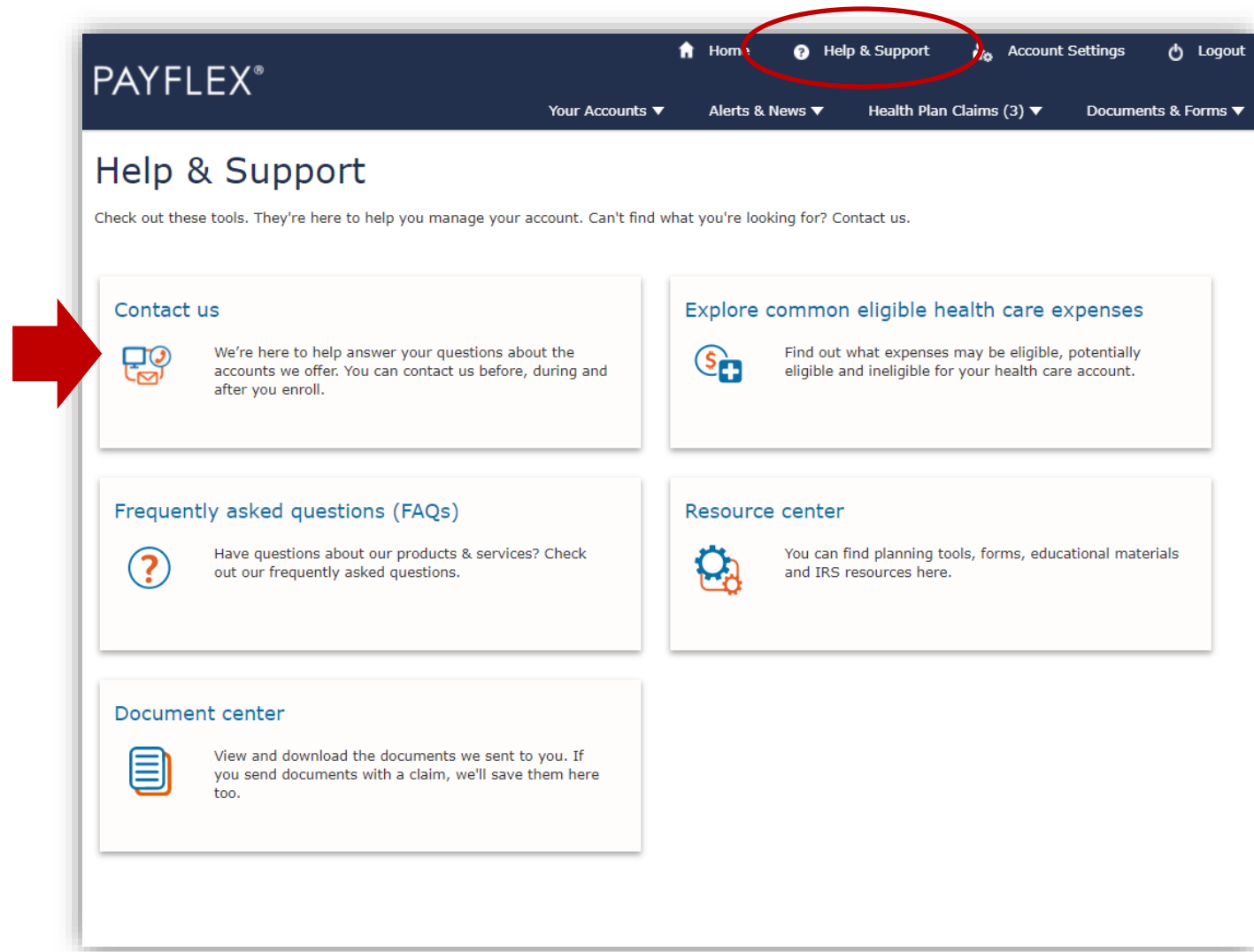
- 1.Download and print your coversheet.
- 2.Fax or mail your coversheet and supporting documents. [?](#)
- 3.To view the status of your request, go to Claims.

[TAKE ME TO MY DASHBOARD](#)

[DOWNLOAD COVERSHEET](#)

We're here to help!

For any questions, log into www.TexFlexERS.com. Select **Help & Support**. Then select **Contact us** to call, email or chat with a TexFlex customer care representative.



This material is for informational purposes only and is not an offer of coverage. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. It does not contain legal or tax advice. You should contact your legal counsel if you have any questions. Information is believed to be accurate as of the production date; however, it is subject to change. PayFlex cannot and shall not provide any payment or service in violation of any United States (US) economic or trade sanctions.

943906-01-01 (1/22)