



# WealthCare Portal

Employee User Guide

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## »» Getting Started

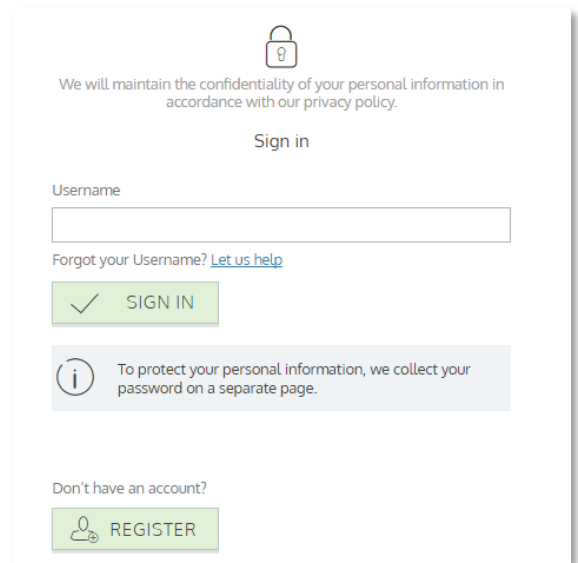
The WealthCare Portal can be accessed by navigating to the following URL: <https://medcom.wealthcareportal.com>

### » Registration

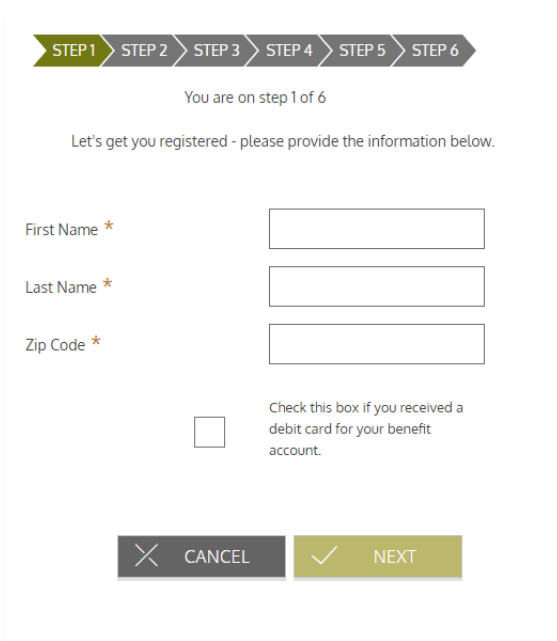
**Step 1:** If this is your first time accessing WealthCare Portal, simply click the register button in the upper right corner of the home screen.

**Step 2:** After clicking the *Register* button, enter the information requested (as shown below).

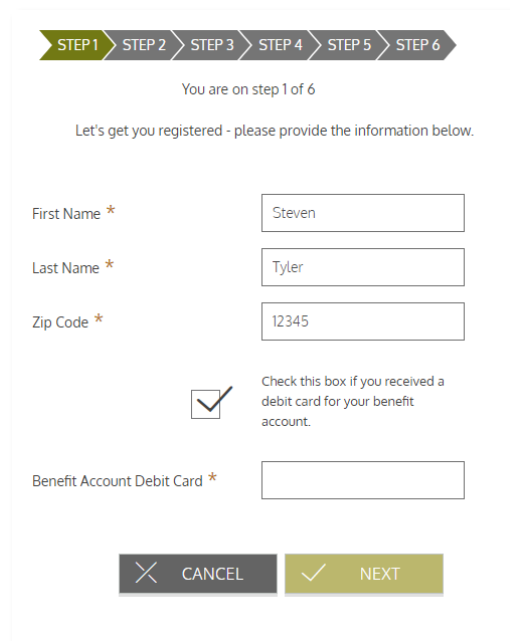
Check the box if you have already received a benefit debit card. If your plan does not offer a card or your card has not arrived yet, do not check the box and click *Next*.



The screenshot shows the 'Sign in' page. At the top, there is a lock icon and a confidentiality statement: 'We will maintain the confidentiality of your personal information in accordance with our privacy policy.' Below this is a 'Sign in' heading and a 'Username' input field. A link for 'Forgot your Username? Let us help' is provided. A green 'SIGN IN' button with a checkmark is visible. A grey information box states: 'To protect your personal information, we collect your password on a separate page.' At the bottom, there is a 'Don't have an account?' section with a 'REGISTER' button featuring a person icon.



This screenshot shows the first step of the registration process. A progress bar at the top indicates 'STEP 1' is active. The text reads 'You are on step 1 of 6' and 'Let's get you registered - please provide the information below.' The form includes three input fields: 'First Name \*', 'Last Name \*', and 'Zip Code \*'. Below these is a checkbox with the text 'Check this box if you received a debit card for your benefit account.' The 'NEXT' button is highlighted in green, while the 'CANCEL' button is grey.

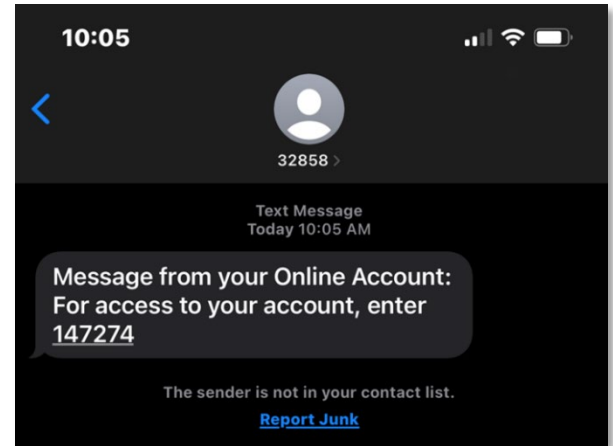
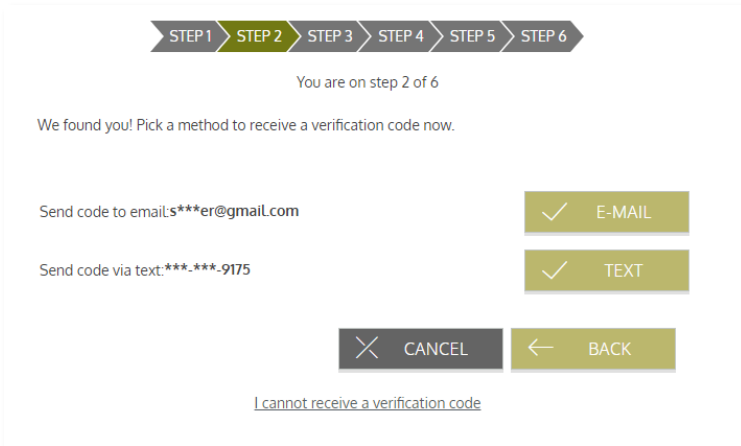


This screenshot shows the registration form with the 'Benefit Account Debit Card' field filled. The progress bar and introductory text are the same. The 'First Name \*' field contains 'Steven', 'Last Name \*' contains 'Tyler', and 'Zip Code \*' contains '12345'. The checkbox for 'Check this box if you received a debit card for your benefit account.' is now checked. The 'Benefit Account Debit Card \*' field is empty. The 'NEXT' button remains highlighted in green.

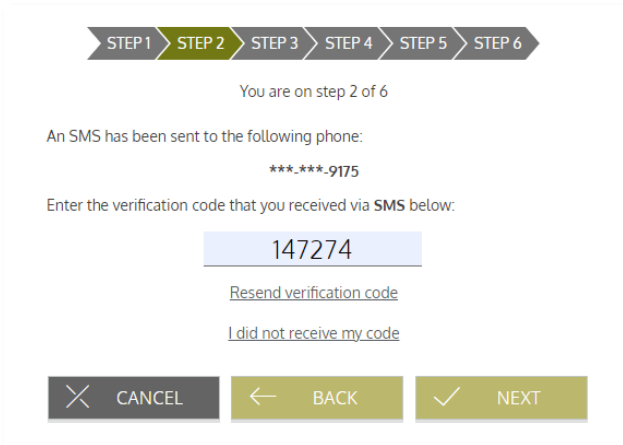
*Note: The following screens will take you through the registration process when a card number is not entered.*

**Step 3:** Select how you would like to verify your account (via text or email).

For security purposes, you must have either an email address or SMS-enabled phone number on file to receive a code to register your account. If you do not have an email or SMS-enabled phone number, you must contact Medcom Customer Service at (800) 523-7542, option 1.



**Step 4:** Enter the code you received, then click *Next*.



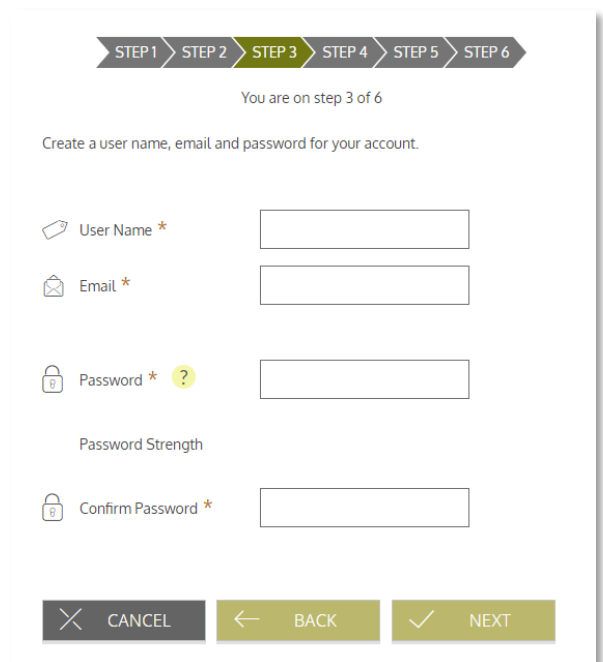
**Step 5:** Create a username, email, and password for your account. Click *Next*.

Note: Passwords must meet the following criteria:

- Must be between 8 and 16 characters.
- Must contain 3 of the following types of characters:
  - Upper case letter
  - Lower case letter
  - Special character (% , ! , @ , etc.)
  - A number

A password may NOT contain:

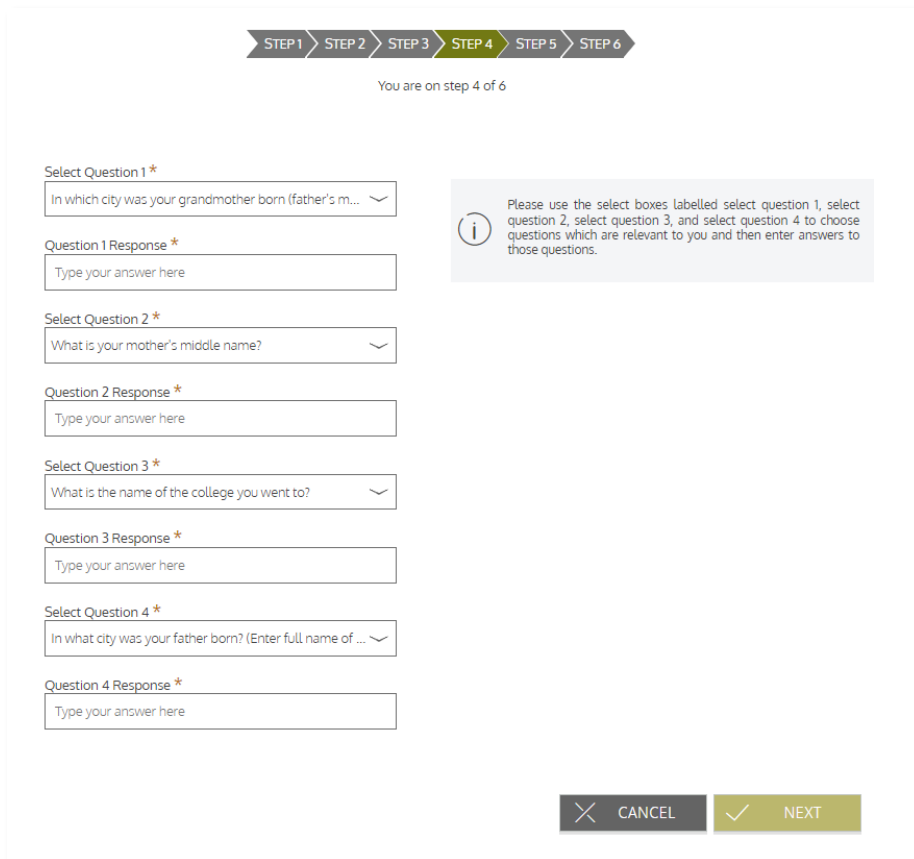
- The same character repeating 3 or more times.
- The word "password"
- The username
- Spaces



**Step 6:** Select security questions.

You must select four security questions and provide your secret answers. These questions are asked at random while attempting to log in to the WealthCare Portal. The questions help provide an additional layer of security and help ensure that only you can access your account.

Once complete, click *Next*.



STEP 1 > STEP 2 > STEP 3 > **STEP 4** > STEP 5 > STEP 6

You are on step 4 of 6

Select Question 1 \*  
In which city was your grandmother born (father's m... ▾

Question 1 Response \*  
Type your answer here

Select Question 2 \*  
What is your mother's middle name? ▾

Question 2 Response \*  
Type your answer here

Select Question 3 \*  
What is the name of the college you went to? ▾

Question 3 Response \*  
Type your answer here


Select Question 4 \*  
In what city was your father born? (Enter full name of ... ▾

Question 4 Response \*  
Type your answer here

ⓘ Please use the select boxes labelled select question 1, select question 2, select question 3, and select question 4 to choose questions which are relevant to you and then enter answers to those questions.

✕ CANCEL ✓ NEXT

**Step 7:** On the next page, you're prompted to verify your email address. Once complete, click *Next*.



STEP 1 > STEP 2 > STEP 3 > STEP 4 > **STEP 5** > STEP 6

You are on step 5 of 6

First Name Steven

Last Name Tyler

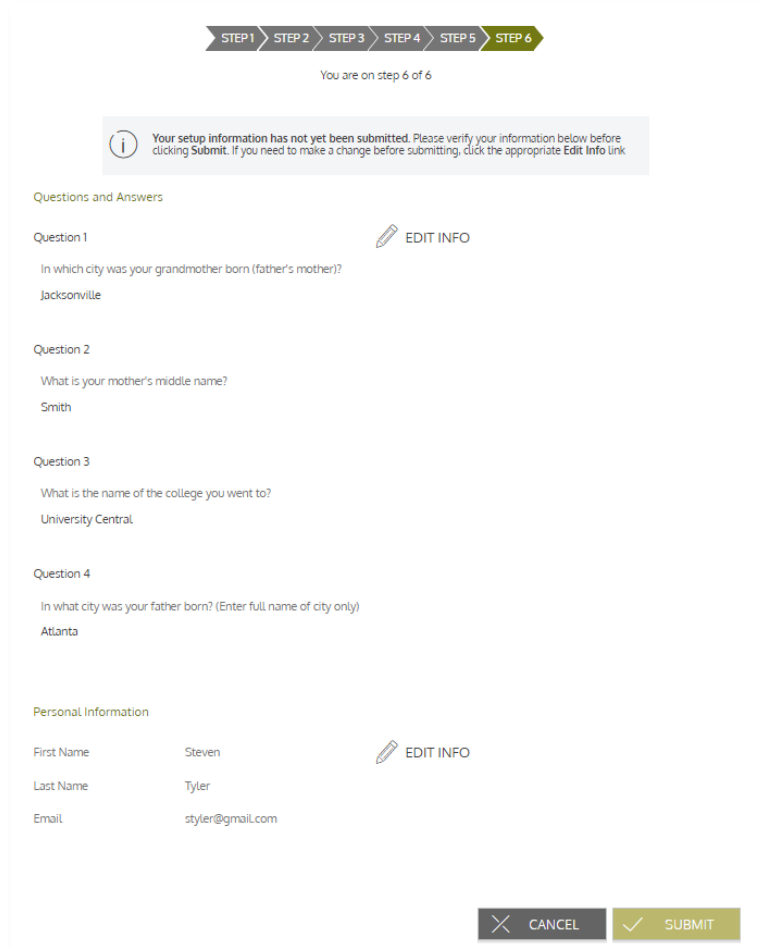
✉ Confirm Email \* styler@gmail.com

ⓘ The email address entered is used for security encryption only. It is not used for solicitation purposes.

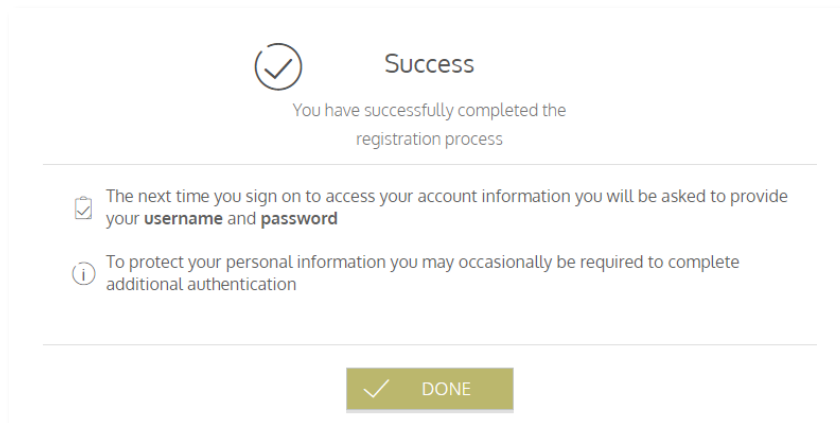
✕ CANCEL ✓ NEXT

**Step 8:** Submit setup information.

On the next page, you're asked to verify all the information you've entered. After you've reviewed and confirmed the accuracy of the information, please click *Submit*.



A confirmation page displays, showing that the registration process is now complete.

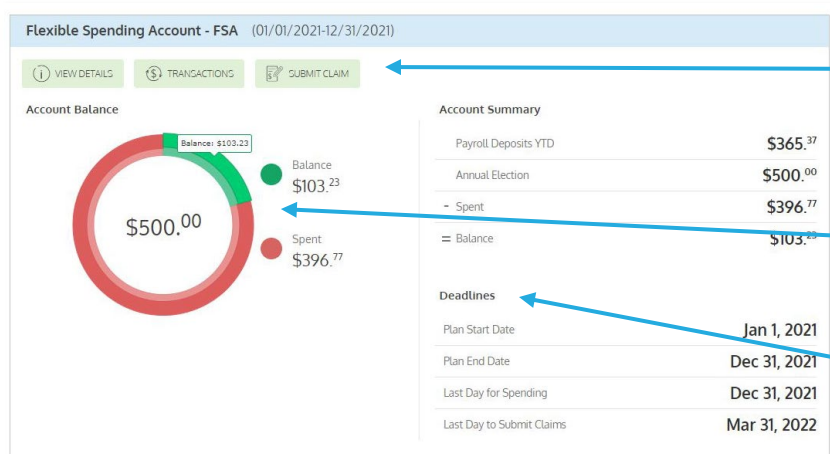


## ➤ Your First Login

After registering, for all subsequent logins, you can enter your username and click the *sign in* button on the home page. You are prompted to answer two of your four security questions and then enter your password.

## »» Checking Your Account Balances

To access a quick view of your account balances, navigate to the *benefit account summary* page. Each account displays in a separate tile and provides at-a-glance details such as balance, amount spent, and important dates surrounding your account's plan year.



Buttons provide quick links to additional account details, a list of account transactions, and an electronic claim form, so you can immediately submit a claim.

Chart shows how much of the annual election has been spent, and how much is still available to spend.

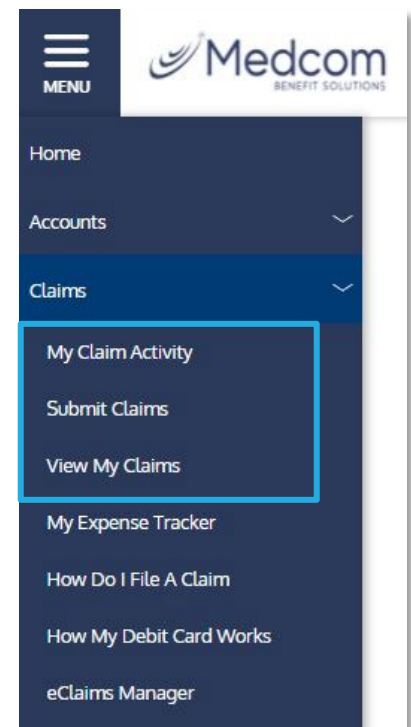
'Deadlines' section shows important dates, such as the last day funds can be spent, and the last day claims can be submitted against the plan.

## »» Submitting an Expense or a Claim

WealthCare Portal allows you to enter new claims and expenses, as well as view and edit pending ones. If you have a receipt to substantiate your claim, you can easily attach it to a claim or expense to expedite the reimbursement process.

To clarify for the purposes of this guide:

- **Claims** are simply reimbursement requests submitted for costs incurred when receiving eligible services.
- **Expenses** are used to track and manage your medical, dental, vision, prescription, and other potentially eligible expenses. Once entered, eligible expenses can be submitted for reimbursement, like claims. They can be submitted now or later; just make sure to submit them within the filing deadlines.



CLAIM DETAILS DOCUMENTATION CONFIRM SUBMISSION

1 Claim Form Instructions

Please complete all required fields below. You must attach your receipt(s) in order for your claim to be processed for reimbursement.

PLEASE NOTE: WE WILL NOT PAY YOUR PROVIDER DIRECTLY! ALL REIMBURSEMENTS ARE PAYABLE TO THE PRIMARY ACCOUNT HOLDER. WHEN COMPLETING THE FORM BELOW, SELECT 'NO' WHEN ASKED TO PAY TO PROVIDER.

1 This form is intended only for claims that you wish to obtain reimbursement for services you paid for out of pocket and not with your debit card. Please navigate to the "Pending Claims" section of the website to submit receipts for debit card transactions.

If you are submitting a claim for Dependent Care, please include your child(ren)'s birthdate and provider's tax ID number in the "Notes." Your claim will be denied without this information. Your receipt must include the dates the services rendered and total charges for the care provided.

\* - Required Field

Service Start Date \*

Service End Date

Claimant

Account Type \*

Claim Amount \*

Whom shall we pay?

Pay Provider  Pay Me

Provider Name

Account Number

Comments

CANCEL NEXT

## ➤ Submitting a Claim

To enter a claim and request reimbursement, open the submit claims page and complete the form. Be sure to upload a receipt if you have one; your claim cannot be processed without it. You can click browse to navigate to the receipt file or drag and drop. Click 'submit' to send the request to your administrator for processing.

**Medcom will only send payments to you and not to your service provider.** When entering a claim, choose to have reimbursed funds sent to you.

Whom shall we pay?

Pay Provider  Pay Me

Provider Name

Account Number

Comments

## ➤ Adding an expense for future payment

Similar to submitting a claim, to enter an expense, open the My Expense Tracker page and complete the form. Be sure to include a receipt if you have one.



Add claim for future reimbursement

\* - Required Field

Service Start Date \*   
 Service End Date \*

Claimant \* Hope, Kacy  
 Provider  
 Description

My Responsibility \$ *calculated automatically*  
 Reimbursed from My Accounts \$ *calculated automatically*  
 My Remaining Responsibility \$ *calculated automatically*

Amount Your Provider Charged or Insurance Allowed Amount must be greater than 0.00.  
 Amount Your Provider Charged \$  
 Insurance Allowed Amount \$  
 Amount Covered by Insurance \$  
 Amount You Paid Out-Of-Pocket \$

Comments

Upload Receipt  BROWSE  
 DRAG & DROP your receipts here  
 CANCEL SUBMIT

- **Billed amount:** The full amount billed for the services provided.
- **Insurance allowed amount:** The maximum amount your health insurance plan will pay for the services provided (sometimes called the 'negotiated rate').
- **Insurance paid amount:** The amount covered by your health insurance plan.
- **Paid non-reimbursable:** The cost included in the insurance allowed amount that is for ineligible items or services.
- **My responsibility:** Any part of the insurance allowed amount that is not covered by your health insurance plan (calculated automatically).
- **Reimbursed from my accounts:** The amount reimbursed from your benefit accounts (calculated automatically, but when entering a new expense, this amount will always be \$0.00 unless you have been reimbursed for a portion of the expense previously).
- **My remaining responsibility:** This is the remaining amount you can submit for reimbursement.

## ➤ Viewing Claims and Expenses

Once entered, claims and expenses can be viewed on the *My Claim Activity* page. From here, you can view claim statuses, attach receipts, and request reimbursement for eligible expenses.

Claim Activity

Which claims do you want to see? Select activities ▾

Action Needed    Approved/Paid/Submitted    Denied

[ADD EXPENSE](#)   [SUBMIT CLAIM](#)

[SEARCH FOR CLAIMS](#)

Approved/Paid/Submitted		
(\$50. <sup>98</sup> )	Paid WALGREENS #3746	Card Date of Service: Sep 21, 2021 Date of Transaction: Sep 22, 2021
(\$85. <sup>00</sup> )	Paid CARESPOT HENDRICKS	Card Date of Service: Sep 21, 2021 Date of Transaction: Sep 22, 2021
(\$25. <sup>79</sup> )	Paid CVS/PHARMACY #01114	Card Date of Service: Sep 19, 2021 Date of Transaction: Sep 20, 2021
(\$40. <sup>64</sup> )	Paid WALGREENS #3746	Card Date of Service: Sep 19, 2021 Date of Transaction: Sep 20, 2021
(\$24. <sup>28</sup> )	Paid WALGREENS #3746	Card Date of Service: Aug 18, 2021 Date of Transaction: Aug 19, 2021

## »» Resolving Pending Debit Card Transactions

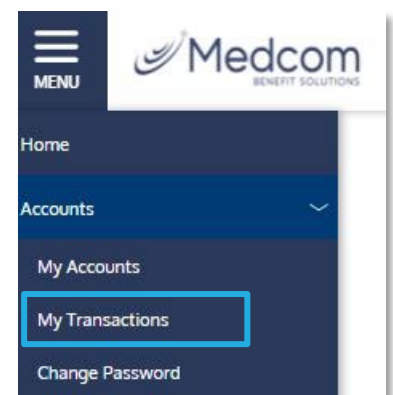
If you swipe your benefit debit card for eligible products or services, you may be required to submit a receipt or other supporting documentation before the card transaction can be approved. To aid in resolving pending debit card transactions, you can take the following action:

**Step 1:** Navigate to the *My Transactions* page in WealthCare Portal.

**Step 2:** Locate the pending transaction (using the search filters at the top of the page, if necessary).

**Step 3:** Click to expand the transaction and click 'add receipt' to attach your supporting documentation to the transaction.

Your administrator will review the document you've submitted and will update the transaction accordingly.



Year  Plan  Type

Which transactions do you want to see? Select activities  Approved/Posted  Pending/Processing  Authorized  Denied [SEARCH FOR TRANSACTIONS](#)

(\$62. <sup>00</sup> )	Flexible Spending Account - FSA <b>Pending</b>	<b>Card</b> DOWNTOWN DENTAL ASSOCI	Aug 26, 2021	
Date Of Service	Aug 25, 2021	RECEIPTS No receipts to display.		
Description	DOWNTOWN DENTAL ASSOCI			
Claimant				
Account	Flexible Spending Account			
Plan Start Date	Jan 1, 2021			
Plan End Date	Dec 31, 2021			
Merchant Name	DOWNTOWN DENTAL ASSOCI			
<b>Payment Details</b>				
Total	\$62. <sup>00</sup>			
Posted	\$62. <sup>00</sup>			
Ineligible	\$0. <sup>00</sup>			
Remaining Balance Due	\$0. <sup>00</sup>			
Approved	\$62. <sup>00</sup>			

## »»» Ordering a New Debit Card

You can obtain your PIN number from the online portal or mobile app. You can also order a new debit card using the self-service option on the WealthCare Portal. In the upper right corner of the page, click on the down arrow next to your name. Click on the "Debit Card(s)" link. This will show all debit card(s) issued and the status of each.

PCA Store Marketplace Notifications Hi, John Smith


- Profile
- Debit Card(s)**
- Communications Settings
- Contact Us
- Log out
- Last login: 9:54am on Sep 24, 2021

	**** -3806	Active	Tony Stark
	**** -6703	Lost/Stolen	Tony Stark


When you click on the card, the section will expand, offering more options.

 **** -3806	Active	Tony Stark	<a href="#">VIEW PIN</a>
Issue Status: Sent	Activation Date: Oct 8, 2020	<a href="#">REPORT LOST / STOLEN</a>	
Mailed Date:	Expiration Date: Oct 31, 2023		

Clicking the "View PIN" link will allow you to obtain your PIN number. You can use your card as either a debit or credit transaction.


 **** -1173	New	Tony Stark	<a href="#">ACTIVATE</a> 2241
Issue Status: Issue	Activation Date:	<a href="#">REPORT LOST / STOLEN</a>	
Mailed Date:	Expiration Date: Oct 31, 2025		

Clicking the "Report Lost/Stolen" button will allow you to report your current card lost/stolen so a new one can be ordered.

 **** -3806	Active	Tony Stark	<a href="#">VIEW PIN</a>
Issue Status: Sent	Activation Date: Oct 8, 2020	<a href="#">REPORT LOST / STOLEN</a>	
Mailed Date:	Expiration Date: Oct 31, 2023		

Mark as Lost/Stolen ×

You are going to mark your card  
 XXXX-XXXX-XXXX-3806  
 as lost / stolen

 Do you want to issue a new card?

No
  Yes

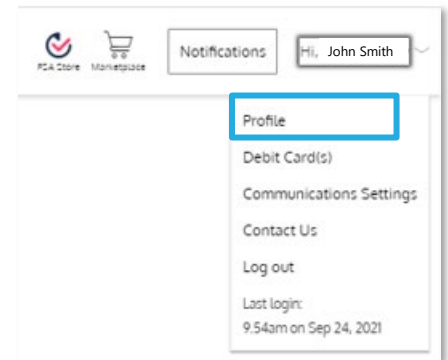
There may be a cost to issue a new card. For questions regarding possible costs, please contact your administrator.

After clicking the "Report Lost/Stolen" button, a window will pop up asking if you want a new card ordered. Click "Yes" and "Submit". Your debit card will typically arrive within 7-10 days.

## »» Viewing and making updates to your user profile

To access and edit your user profile, click the down arrow next to your name in the upper right corner of the page. From this page, you can:

1. Update your phone number and address.
2. Change your password
3. Update your reimbursement method
4. Update an existing dependent



The image below shows where each item in the list above is located.

**User Profile Information:**

- Profile:** change picture
- Name:** NewApp Two
- Date of Birth:** Mar 31, 1985
- Employee ID:** \*\*\*\*\*1045
- Marital Status:** None
- Gender:** Gender
- Phone:** 555-444-1234
- Email Address:** [edit](#)
- Home Address:** 1 Main Street, Beverly, MA, 00000, US (1)
- Employer:** Medcom Benefit Solutions
- SSN:** no data
- Employee Status:** Active
- Reimbursement Method:** Direct Deposit (3)
- Bank:** Eastern Bank
- Account Number:** \*\*\*\*2356
- Routing Number:** \*\*\*\*1798
- Checking:** Checking
- Actions:** [EDIT PROFILE](#), [change password](#) (2)

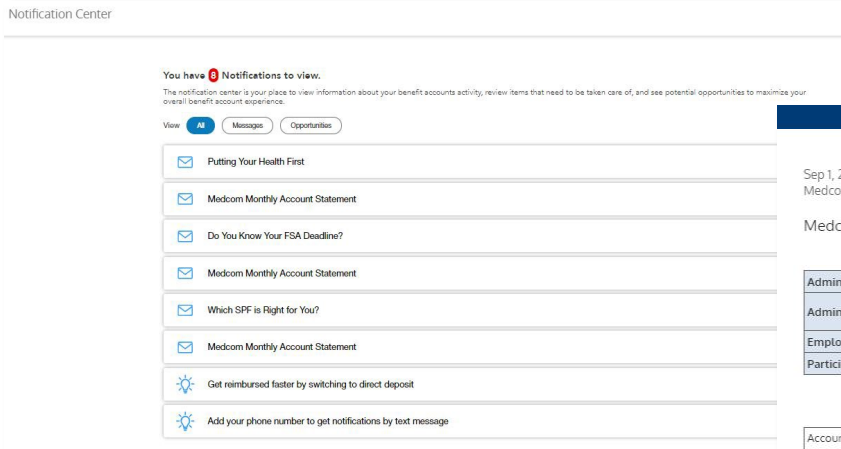
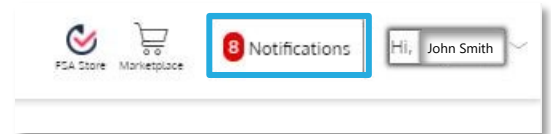
**Family Members:**

- Spouse:** Spouse NewApp Two (Spouse Or Common Law Spouse)
- Date of Birth:** [blank]
- SSN:** [blank]
- Gender:** None
- Phone:** [blank]
- Employer:** Medcom Benefit Solutions
- Dependent ID:** \*\*\*\*0000
- Home Address:** 1 Main Street, Beverly, MA, 00000, US (4)
- Actions:** [EDIT DEPENDENT](#), [REMOVE DEPENDENT](#)

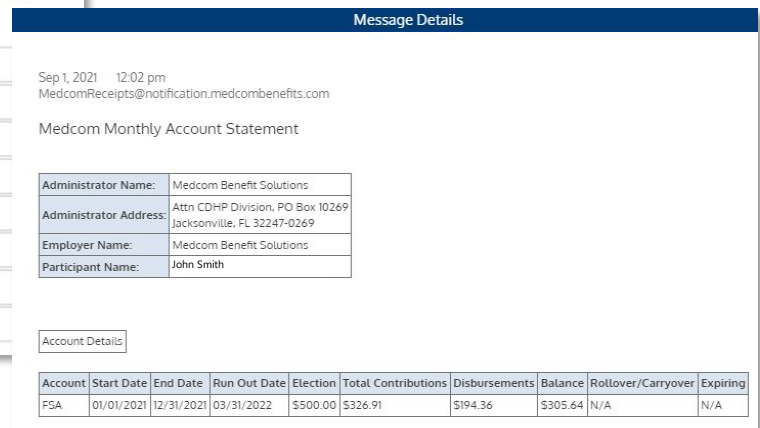
## »» Managing messages and alerts

The notifications icon in the upper right corner (next to your name) alerts you to any unread messages awaiting your review.

Depending on your communication preferences and your employer’s setup, these messages could be anything from a password change, a card mailed notification, an alert that a card transaction was denied, or a variety of other messages.



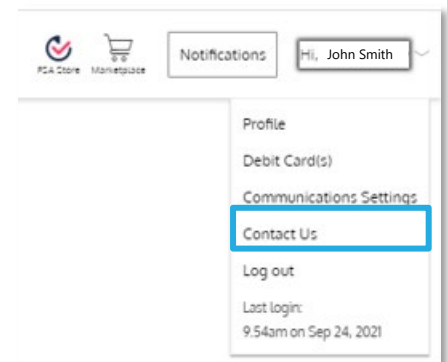
Click on an individual message to see the full text:



## » Changing your message preferences

You can change whether you receive certain message types, as well as how you receive them from the communication settings page. This page can be accessed by clicking the down arrow next to your name in the upper right corner of the page.

For each alert type, you may choose whether you receive it via mobile, email, both, or neither. Click 'save' when you are done editing your preferences. You can also use this page to update your email address and register your mobile phone for SMS text messages.



### Assigned Notifications



The notifications below are available to you. Please define the delivery method for each notification you wish to receive. Please ensure you have an email address and/or registered mobile in order to receive these notifications.

mobile
  email
  both
  none

- Account Balance Statement**  mobile  email  both  none

This communication is sent on a Monthly basis.
- Card Lost/Stolen**  mobile  email  both  none

This communication is sent when your card has been marked as "Lost/Stolen".
- Card Mailed**  mobile  email  both  none

This communication is sent when your card has been mailed.
- Card Transaction Denied**  mobile  email  both  none

This communication is sent when your card is denied at the point of sale. It will outline why the denial has occurred.
- Enrollee Welcome Email**  mobile  email  both  none

This communication is sent when your account is created.
- Online Balance Repayment Confirmation**  mobile  email  both  none

This communication is sent to an employee when an employee initiates a payment for a balance due.
- Online Balance Repayment Failure**  mobile  email  both  none



This communication is sent to an employee when a payment for paying back the balance due fails.
- Password Change**  mobile  email  both  none

This communication is sent when your portal password has been updated.
- Year End Reminder**  mobile  email  both  none

✓ SAVE

### Email Address

### Phone Registration Status

12: Pending  



You will receive a text to the number shown above asking you to complete the registration process. Once registered, your phone's status will show as Registered instead of Pending. If your number remains in Pending status or if you never receive the registration text, please contact support for assistance in resolving the issue. Once registered, text BAL to 97487 to receive your current year account balances. You can opt-out at anytime by texting STOP. For help with text commands, please text HELP to 97487.