

Your Brand.

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Jane Anderson ▾
Logout

Welcome, Jane

Welcome to your single source for all your benefits. File claims, check your claim status, find out about your previous claims, and receive notifications about your claims.

New Mobile Apps
Download the free mobile app for your accounts whenever and wherever you want.

- Profile Summary
- Dependents
- Bank Accounts
- Debit Cards
- HSA Beneficiaries
- Login Information

Learn more about your pre-tax benefits, account balance and summary information, upcoming payment, access important documents, and more!

Download the app for your Android mobile phones and manage your accounts.



Action Required:
[1 repayment\(s\) totaling \\$5.00 due](#) for claims you were paid and later deducted.
[4 receipt\(s\) needed](#) to approve your claim.

Accounts [View Account Summary](#)

Account	Available Balance	Final Service Date	Final Filing Date	Actions
Health Savings Account	\$3,714.18	--	--	Request Distribution Contribute to HSA View Activity Change Election
Limited Purpose FSA 1/1/2011 - 12/31/2011	\$1,830.00	12/31/2011	1/31/2011	File Claim View Claim History
Dependent Care 1/1/2011 - 12/31/2011	\$208.33	12/31/2011	1/31/2011	File Claim View Claim History
HRA 1/1/2011 - 12/31/2011	\$200.00	12/31/2011	1/31/2011	File Claim View Claim History
Mass Transit 1/1/2011 - 12/31/2011	\$25.00	12/31/2011	1/31/2011	File Claim View Claim History

Next Scheduled Reimbursement Processing on 2/13/2011 [View All Payments](#)

You can expect to receive your payment for claims processed on the reimbursement processing date above as follows depending on the payment method: direct deposit payments will be deposited into your bank account 2 business days after the processing date and checks will be mailed 1 day after the processing date.

Your actual payment amount will be based available balance as of the time of processing and the claims eligible to be reimbursed. The projected payment below is based on the current state your balance and claim status, which does not take into account any contributions that may occur before the reimbursement processing.

Accounts with a Projected Claim Reimbursement

Account	Submitted Claims	Paid	Pending	Denied	Method	Projected Payment*
Dependent Care 1/1/2011 - 12/31/2011	\$500.00	\$208.33	\$291.67	\$0.00	Direct Deposit	\$208.33
*Based on balance and claim status as of 2/11/2011; subject to change.					Total Projected Payment	\$208.33



Questions?

Contact Customer Support at (555) 555-5555, toll free at (888) 555-5555 or email us at support@sampleadmin.com.

Accounts

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Notifications

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