

TexFlex Online Claim Submission User Guide

To submit a claim online, visit www.TexFlexERS.com and log in to your TexFlex account by selecting the **Login/Register** button. You'll need to register your account if you haven't already done so. Submitting your claims online is quick and easy, just follow the instructions below.

Log into your TexFlex account and select **Submit a Claim** from the menu.

TYPE OF CLAIM

Select the type of claim. You may see the following options depending on which accounts you are enrolled in:----

- Health Care Claim
- Dependent Care Claim
- Limited FSA Claim
- Parking CSA Claim



CLAIM DETAILS

Select the type of claim from the drop down box and complete these fields:

- · Dates of Service
- Claim Amount
- Provider Name
- Benefit Recipient (your name)

Read the terms and conditions message in the box and select the "I CERTIFY THAT..." box. ---



(continued)





IMPORTANT! Images of your documentation must be in PDF, .TIF or .JPG format. Save the images to a convenient location on your computer, such as your desktop.

UPLOADING DOCUMENTATION

Select **Find Receipt** and upload to provide documentation for your claim.

Select Submit Claim.



When your claim is submitted, you will see a message that says the upload was successful.....

You have the option to submit another claim.

Claims are typically reviewed and paid within 5 - 7 business days. If your claim is approved, your payment will be released.

You may login and review the status of your claim after it is submitted. TexFlex will notify you if your claim is paid or requires other documentation.

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	MY ACCOUNT Account Summary	Submit a cl	aim					
	Submit a claim Search Card Services Document and Forms	YOU SUBM	T CLAIM	WE REVIEW CL	UM	YOU GE	TPAD	
	Closed Accounts	We have succ Based upon or when it has be	essfully received you ar review we will dete en paid or if for any n	r claim rmine if your claim is eligit eason we need additional	lie to be paid. Be Information from y	on the look out for you.	an alert	
	ENROLLMENT MANAGE MY SPENDING HELP	Want to get paid faster? X Direct Deposit is the fastest way for you to get access to your spending account funds. Sign Up for Direct Deposit Now! CLICKERE						
_	ADDITIONAL LINKS	CLAIM ID	SOURCE	туре	DATE	REQUESTED	PAID	10
-	Claim Processing Fax: 1-866-643-2219	0113869437008	Online	Health Care	9/14/2016	\$5.00	\$0.00	
						SUBMIT	ANOTHER CLAIM	
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