

New User Information for MYBENNY.COM

1 When cardholders first access mybenny.com, they will be presented with the following screen:

- If this is the Cardholders very first time to mybenny.com, they will need to “Register”
- If the Cardholder has already registered, they will enter in their “User Name and Password to access the site.

MyBenny™

Welcome to Benny™ Central System Login

My Benny Login

Education Center →

IIAS Merchants →

Login

First time using MyBenny? [Please Register](#)

Email Address:

Password:

Login

[Forgot password](#)

[Change username or password](#)

2. New “Unregistered” Cardholders will see the following screen to be completed.

MyBenny™

Welcome to Benny™ Central System Login

My Benny Login

Education Center →

IIAS Merchants →

Confirm User Account

Please enter the following information if you would like to:

- Register a new user account
- Recreate a forgotten password
- Change your username or password

Member ID:

Card Number: Please do not include spaces

Zip Code:

Continue

3. New "Unregistered" Cardholders will input an email Address (this will be their User Name and must be in email format). The cardholder will then create their password and "Create Account"

Login Information

Enter your Email Address for the user name and create a personalized password that you won't forget.

Email Address:

Confirm Email Address:

NOTE * If you do not have an email address, please enter your desired identity in the following format: john.doe@myemail.com

Password:

Confirm Password:

* Must be between 8 and 15 characters and contain one number.



Member must click here to create account

Cardholder Home Page

Welcome, lydonct@cox.net. [Logout](#)

Cardholder Admin
Home
Cardholder Profile
Cardholder Activity
View All Activity
Activity Dispute Form
Cardholder Reports
Cardholder Statement
Cardholder Spending by Service
Cardholder Services
IIAS Merchants

Cardholder's Name: LYDON, CRAIG **Cardholder's ID:**

Cardholder Profile **Card Status**

Client Name: Evolution Benefits Inc Card
Cardholder Address: 4 PEAK MOUNTAIN
Cardholder Phone:
Cardholder Email:
Cardholder Benefit Plan:
Cardholder Alternate PBM ID:
Cardholder Follow UP Required:

Card Status
Active
To report your card as lost or stolen or to request a new card, please contact your administrator.

[Update Profile](#)

Tools
[Help Index](#)
[Help for this page](#)
[Education Center](#)
[User Guides](#)
[Form Downloads](#)

Summary Sheet
Details are delayed due to processing...

Account	Election Amount	Settlements	Adjustments	Settled Balance	Auth. Not Settled	Available Balance
FSA2008	\$5,350.00	(\$3,195.00)	\$0.00	\$2,155.00	\$0.00	\$2,155.00

Recent Activity Details
NOTE: To view a specific activity click on the Activity Type (Type) for that activity.

Trans Date	Settle Date	Type	Amount	Account	Description	MCC	Substantiation
4/30/2008 8:47:52AM	5/2/2008 2:12:47PM	Settlement	(\$50.00)	FSA2008	CVS PHARMACY	5912	No Follow Up Required
4/26/2008 9:55:26AM	4/28/2008 1:30:58PM	Settlement	(\$40.00)	FSA2008	SOUTH WINDSOR NECK & BACK	8041	Pending
4/8/2008 8:34:03AM	4/10/2008 12:52:18PM	Settlement	(\$50.00)	FSA2008	CVS PHARMACY	5912	No Follow Up Required

After the cardholder has successfully logged into mybenny.com they will have the ability to:

- View All Transaction Activity for their account
- Print out their own Cardholder Statement, showing all transaction activity
- Update their email address via Cardholder Profile
- View IIAS Merchant list.

To view All Transaction History, cardholder will click on “View All Activity” link from left-hand navigation bar. Cardholder will see following screen:

Transaction Activity

Cardholder has ability to “View All Transactions” The screen view is the same view as the Administrator can see on BennyCentral.

Recent Transactions

Page 1 of 3 < Previous | 1 | 2 | 3 | Next >

Trans Date	Settle Date	Type	Amount	Account	Description	MCC	Substantiation
9/7/2005 8:02:38 PM		Purchase Approved NotSettled	\$61.07	FSA2005	Authorization	5912	Pending
8/26/2005 2:54:57 PM	8/28/2005 2:10:17 PM	Settlement	(\$50.30)	FSA2005	CVS PHARMACY #1166 Q03	5912	Documentation Required
8/26/2005 10:51:28 AM	8/28/2005 2:10:15 PM	Settlement	(\$30.00)	FSA2005	USA. FAMILY MEDICINE	8099	CoPay Match
8/24/2005 12:46:10 PM	8/25/2005 1:12:17 PM	Settlement	(\$45.00)	FSA2005	PRIME HEALTHCARE	8011	CoPay Match
8/19/2005 10:34:08 AM	8/22/2005 1:01:13 PM	Settlement	(\$45.00)	FSA2005	USA HOSPITAL	8062	CoPay Match
8/13/2005 5:42:37 PM	8/15/2005 1:01:05 PM	Settlement	(\$9.08)	FSA2005	CVS PHARMACY #1166 Q03	5912	Documentation Required
8/12/2005 9:34:36 AM	8/12/2005 1:34:36 PM	Decline	(\$45.00)	N/A	USA HOSPITAL HARTFORD US Invalid Expiration Date	8062	N/A
8/5/2005 12:34:35 PM	8/7/2005 1:00:35 PM	Settlement	(\$100.00)	FSA2005	CVS PHARMACY #1166 Q03	5912	CoPay Match
7/28/2005 6:01:49 AM	7/30/2005 1:01:12 PM	Settlement	(\$30.00)	FSA2005	USA. FAMILY MEDICINE	8011	CoPay Match

Cardholders have ability to see account balance declines (with reasons) and substantiation information.

Pending = Trnx is pending substantiation

Documentation Required = Indicates to cardholder that a Follow Up letter will be or has been generated.

Cardholders can click on the link in “Settlement” column to view more detail

- Clicking on Documentation required will show Cardholder if letter has been generated.

Transaction Activity Detail

Cardholder can click on the link in the “Type” column to view more detail about the transaction. This is particularly useful when viewing Declined transaction and those that are marked as “Documentation Required”.

Transaction Activity Detail screen for a Declined Transaction:

Cardholder's Name: SMITH, JACK	Cardholder's ID: 987654321
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Cardholder Activity > Detailed Activity Info

Client Name ABC Inc	SUBSTANTIATION STATUS:
Cardholder ID	N/A
Cardholder Name Jack Smith	

Activity Details

Authorization Code 0
Log ID 1146084579
Reference Number
Merchant Name USA, HOSPITAL HARTFORD US
Merchant Number ID 0927702046018830
MCC 8062
MCC Description Hospitals

Decline Details

Reason for Decline Invalid Expiration Date
POS Entry 100
AVS Info ?
AVS Response ?
Terminal Number 0
Expiration Date 101
CVV
CVV2
POS Data

Cardholder will see detailed info as to what the decline reason means

Description: Invalid Expiration Period

The expiration date provided by the merchant does not match the card expiration date on the Benny Card system. Typically, this is caused by a data entry error by the merchant.

Decline Action:

- The merchant can re-enter the expiration date and submit the transaction again.

Accounts Affected

Account	Amount
N/A	(\$45.00)

[Activity Dispute Form](#)

Transaction Activity Detail screen for a "Documentation Required" Transaction:

Cardholder's Name: SMITH, JACK **Cardholder's ID:** 987654321

Cardholder Activity > Detailed Activity Info

Client Name ABC Inc
Cardholder ID
Cardholder Name Jack Smith

SUBSTANTIATION STATUS:
Documentation Required

Activity Details

Authorization Code 303122
Log ID 1146103122
Reference Number 24445005226212381939041
Merchant Name CVS PHARMACY #1166 Q03
Merchant Number ID 4445042411660
MCC 5912
MCC Description Pharmacies, Drugs Stores

Accounts Affected

Account	Amount
FSA2005	(\$9.08)

[Activity Dispute Form](#)

Substantiation Info

[-] Cardholder Follow Up

Follow Up Requests	Follow Up Date
First Request	8/24/2005 8:09:00 PM



Cardholder can see when Follow up letter was generated/sent

General Comments

Cardholder Follow Up

Transaction Disputes

Cardholders have the ability to complete a transaction dispute form from within mybenny.com. Cardholders would access the transaction detail for the transaction in question and click on the following "Activity Dispute Form" link. This will open up a printable form for the cardholder to complete and mail or fax into Evolution Benefits Transaction Dispute Services

Cardholder's Name: SMITH, JACK

Cardholder's ID: 987654321

Cardholder Activity > Detailed Activity Info

Client Name ABC Inc
Cardholder ID
Cardholder Name Jack Smith

SUBSTANTIATION STATUS:
Documentation Required

Activity Details

Authorization Code 303122
Log ID 1146103122
Reference Number 24445005226212381939041
Merchant Name CVS PHARMACY #1166 Q03
Merchant Number ID 4445042411660
MCC 5912
MCC Description Pharmacies, Drugs Stores

Accounts Affected

Account	Amount
FSA2005	(\$9.08)

[Activity Dispute Form](#)



Cardholder can click on "Activity Dispute Form" and complete the "Transaction Dispute Form" and submit to fax or address on form

Substantiation Info

[-] Cardholder Follow Up

Follow Up Requests	Follow Up Date
First Request	8/24/2005 8:09:00 PM

General Comments

Cardholder Follow Up

Transaction Dispute Form

Cardholder should complete ALL fields on the Transaction Dispute Form. Once complete, the cardholder will sign the form and fax/mail the form to Evolution Benefits – Transaction Dispute Services

Cardholder Information

First Name: JACK
Last Name: SMITH
Phone: (123)123-1234
Email:

Address

Address Line 1 122 BROOK STREET
Address Line 2
City SAN ANTONIO
State/Province TX - Texas **Zip/Postal Code** 12345
Country USA - United States

Activity Information

Card Number:
Amount: 9.08
Transaction Date: 8/13/2005
Post Date: 8/15/2005
Reference Number: 24445005226212381939041
Transaction Description: CVS PHARMACY #1166 Q03

Reason For Dispute

My card was stolen

Generate Dispute Form

Cardholder Statement

Cardholders have the ability to print out a copy of all their transaction activity using "Cardholder Statement". The statement is an HTML document.

Report Name: Cardholder Statement

As of: 9/8/2005 2:50:56 PM

Cardholder Statement

Employer: ABC Inc

Cardholder: JACK SMITH

Activity Summary:

* Accounts	* Total Value Loaded	* Settlements	* Manual Claims	* Paid Balance	* Pending Settlements	* Available Balance
FSA2005	\$2,750.00	(\$1,791.70)	\$0.00	\$958.30	61.0700	\$897.23

*Details may be delayed due to processing...

Activity Details:

Account	Transaction Date	Settle Date	Activity Type	Amount	Merchant	Substantiation
FSA 2005	8/26/2005	8/28/2005	Purchase Approved Settled	(\$50.30)	CVS PHARMACY #1166 Q03	Documentation Required
FSA 2005	8/26/2005	8/28/2005	Purchase Approved Settled	(\$30.00)	WINDSOR FAMILY MEDICINE	CoPay Match
FSA 2005	8/24/2005	8/25/2005	Purchase Approved Settled	(\$45.00)	PRIME HEALTHCARE	CoPay Match
FSA 2005	8/19/2005	8/22/2005	Purchase Approved Settled	(\$45.00)	USA HOSPITAL	CoPay Match
FSA 2005	8/13/2005	8/15/2005	Purchase Approved Settled	(\$9.08)	CVS PHARMACY #1166 Q03	Documentation Required
FSA 2005	8/5/2005	8/7/2005	Purchase Approved Settled	(\$100.00)	CVS PHARMACY #1166 Q03	CoPay Match
FSA 2005	7/28/2005	7/30/2005	Purchase Approved Settled	(\$30.00)	WINDSOR FAMILY MEDICINE	CoPay Match
FSA 2005	7/21/2005	7/23/2005	Purchase Approved Settled	(\$25.84)	CVS PHARMACY #1166 Q03	Documentation Required
FSA 2005	7/19/2005	7/20/2005	Purchase Approved Settled	(\$45.00)	PRIME HEALTHCARE	CoPay Match
FSA 2005	7/7/2005	7/9/2005	Purchase Approved Settled	(\$94.08)	CVS PHARMACY #1166 Q03	Recurring Expense Match