

**WA STATE PEBB DIRECT DEPOSIT AUTHORIZATION FORM  
NAVIA BENEFITS CARD**



**Employee Information**

Last Name, First Name _____		SSN (or Employee ID if higher education) _____	
Address _____	City _____	State _____	ZIP/Postal code _____
<input type="checkbox"/> <b>Address Change</b>			
Email - REQUIRED FOR DEBIT CARD _____		Date of birth (MM-DD-YYYY) _____	

**Navia Benefits Card Election**

**IMPORTANT:**

- Complete the section below if you did **not** elect a debit card when you enrolled in the Medical FSA, Limited Purpose FSA, or DCAP, are requesting additional cards, or if your card was lost or stolen. If you enrolled in both an FSA and the DCAP, you will receive one card loaded with funds from both accounts.
- If you received a card last year and enrolled again this year, your existing debit card will be loaded with your new funds. For that to happen, you must elect the debit card during open enrollment each year you wish to use it.
- **Do NOT complete this section** if you already elected a debit card when you enrolled.

**Navia Benefits Card**

A debit card that pays for your qualifying expenses from the Medical FSA, Limited Purpose FSA, or DCAP. There is no cost for you to receive it. **You must provide an email address to use the debit card.**

- YES, I authorize Navia Benefit Solutions to issue a debit card for my benefit for the 2023 plan year.
- YES, I would like an **additional** card for my spouse or eligible dependent. Please issue a card at no cost for:
- Spouse  Dependent \_\_\_\_\_  
Last Name, First Name

I acknowledge that I have read the entire form and agree to follow federal and state rules for this benefit as explained in the IRS Regulations and in the PEBB Medical FSA, Limited Purpose FSA, and DCAP enrollment guides.

X \_\_\_\_\_  
**Employee Signature** **Date**

**Direct Deposit Authorization**

**IMPORTANT:**

- Complete the section below if your direct deposit information has changed, or if you did **not** provide direct deposit information when you enrolled in the Medical FSA, Limited Purpose FSA, or DCAP.
- **Do NOT** complete this section if you already provided direct deposit information when you enrolled.

**Direct Deposit**  
Reimbursements are electronically deposited into your bank account.

- Checking **Routing #** \_\_\_\_\_
- Savings **Account #** \_\_\_\_\_

This direct deposit authorization will remain in full force and effect until Navia Benefit Solutions has received written notification from me of its termination in such time and in such manner as to afford Navia Benefit Solutions and the banking institution a reasonable opportunity to act on it.

- YES, I authorize Navia Benefit Solutions to electronically deposit my Medical FSA, Limited Purpose FSA, and/or DCAP reimbursements into the above specified bank account.

X \_\_\_\_\_  
**Employee Signature** **Date**

Send signed forms by email to [election@naviabenefits.com](mailto:election@naviabenefits.com), fax (425) 451-7002 or toll-free (866) 535-9227, or mail to Navia Benefit Solutions, PO Box 53250 Bellevue, WA 98015-3250

Customer Service: (425) 452-3500 or (800) 669-3539 Visit our website at [pebb.naviabenefits.com](http://pebb.naviabenefits.com)  
**Please read next page for important information about direct deposit and the debit card.**

### **Direct Deposit**

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- Navia Benefit Solutions will initiate all direct deposits on the same day as the reimbursement date. Once your claim is approved, deposits may take a few days to appear in the designated account.
- Navia Benefit Solutions will deduct a \$10 fee from your Medical FSA, Limited Purpose FSA, or DCAP account for returned items due to incorrect banking information.

### **Navia Benefits Card**

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- You must provide a valid email address to receive the Navia Benefits Card.
- Navia Benefit Solutions will send one card in the mail with your name on it. If you requested an additional card for a spouse or dependent, it will be sent separately. You may request additional or replacement cards at no cost.
- You must elect the debit card each year you want to use the card. The debit card is valid for three years. Navia Benefit Solutions will send you a new card before it expires if you are still enrolled at that time.

### **Substantiating Debit Card Expenses**

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- You have up to 75 days from the transaction date to submit the necessary documentation requested to substantiate a debit card expense.
- Per IRS regulations, debit card transactions that have not been substantiated by the 75-day deadline will result in the temporary suspension of your debit card.
- Your card will be reactivated once all outstanding transactions have been substantiated.

### **Lost Receipts or Ineligible Expenses**

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You have two options if you have an ineligible debit card charge or you lost your receipts:

- Pay back the amount of money you owe for the ineligible/unsubstantiated expense by submitting a personal check, money order, or payment through your bank's online bill pay to Navia Benefit Solutions.
- Submit additional claims to substitute the lost receipt or ineligible expense. You must note on the claim form or online when you substitute a claim for a previous lost receipt or ineligible expense.