



Good News Regarding FSA Claim Filing!

You now have the ability to upload FSA claim forms and receipts on our website www.myRSC.com. Below you will find a quick guide on how to use this brand new feature. If you do not have the ability to upload, you may still fax or email your claim the traditional way. We hope this added feature will provide more convenience when filing your claim.

Online Claim Entry Receipt Upload

May 2012

Log on to www.myRSC.com.

1. Click the "Online Claims Entry" link or the icon.

Benefits | **Contacts** | **Daisy Jane's Weeding and Tilling Service**

Change Personal Information | Change Role | Change Password | Logout

You are logged in as Daisy Jane Howard.
Employee for Daisy Jane's Weeding and Tilling Service (16951789)

Hello Daisy Jane
[Click here to read your notes](#)

**Welcome to your private website,
YOUR Online Resource Service Center!**

Here you can ...

- Learn how your Benefit Plans work!
- See your Account History and Current Balances.
- Download any forms you need.
- Find out when you can change your elections in mid-year.
- Much more as you experience your site.

Just click on the section on your left, and we will take you there!

To find out: Who to contact for your benefit plans?
Click on the Contacts Tab above.
Here you can find out ...

- Name
- Address

Benefit Services

- FAQs
- Online Claims Entry**
- Calculators
- View Your New Documents

Back to TPA site

2. Click "Start New Claim Form."

Benefits | **Contacts** | **Daisy Jane's Weeding and Tilling Service**

Change Role | Change Password | Logout

You are logged in as Daisy Jane Howard,
Employee for Daisy Jane's Weeding and Tilling Service (16951789)

Online Claims Entry

1 Start Your Claims Form
Click on the "Start New Claim Form" button to begin. You can also select previously created claims, if you have any, from the list below.

Start New Claim Form

Previous Claims Entered:

View: Last 30 Days

Form ID	Date Created	Date Printed	Total Claim Amount	Status	Re-Printed*	
36201	4/22/2012	4/22/2012	\$9.00	Printed	<input type="checkbox"/>	VIEW PRINT DELETE
62201	4/13/2012	4/13/2012	\$6,666.00	Submitted	<input type="checkbox"/>	VIEW PENDING DELETE
52201	4/13/2012	4/13/2012	\$5,555.00	Submitted	<input type="checkbox"/>	VIEW PENDING DELETE

Online Claims HELP

3. Select the type of claim you wish to enter.

Benefits | Contacts

Daisy Jane's Weeding and Tilling Service

Change Role | Change Password | Logout

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Employee for Daisy Jane's Weeding and Tilling Service (16951789)

Claim Form ID

2 Select Your Benefits Resource
Add an expense by selecting which benefit resource will fund the expense.

Participant: Daisy Jane Howard
118 Breckenridge Lane
Little Rock AR 72204

Date Created:
Date Printed:
Date Received:

Add an Expense
[Enter an FSA or HRA Medical Claim](#)
[Enter a Dependent Care Claim](#)
[Enter a Parking Claim](#)
[Enter a Transit Claim](#)

Claim Expense

Date Entered	Type	Receipt/EOB Number	Claimant	Relationship	Begin Service Date	End Service Date	Amount	Service	Provider
Claims: 0 Total: \$0.00									

After entering all your claims you must print the receipt cover sheet and fax it with your receipts to receive reimbursement.

[Return to Claim Form List](#) | [Print the Receipt Cover Sheet](#)

4. You may choose to “Submit Online” or “Fax.”

5. Choosing to “Submit Online” allows you to upload the receipt in the form of a pdf document, bmp, gif, png, or jpg file.

- If you choose to “Submit Online” you will not have to print and fax.
- You can still choose to print and fax the forms by selecting the “Fax” option.

6. To upload the receipt, click browse, locate the pdf, bmp, gif, png or jpg file.

Enter a Claim

3 Enter All Required Fields
Enter all required fields, which are indicated in red with an *

How do you want to submit this claim?
 Submit Online
 Fax

Uploaded Receipts

Upload Receipt* [Browse...](#)

Claim

Pay me Pay the Provider

Receipt/EOB Number: [Have Questions?](#)

Claimant: [Have Questions?](#)

Date of Birth: [Have Questions?](#)

Relationship: [Have Questions?](#)

Service Dates*: - [Have Questions?](#)

Amount*: [Have Questions?](#)

Service/Expense*: [Have Questions?](#)

Provider Name: [Have Questions?](#)

Provider Tax ID: [Have Questions?](#)

Note: [Have Questions?](#)

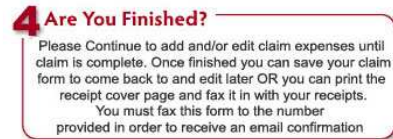
- Click “OK” when asked to verify the upload.



- You can click the “View” link to view the file you uploaded and make sure it is readable.



- Complete the claim fields and click “Save the Claim.” You cannot save unless you have attached a receipt, if you have selected “Submit Online.”
- You can continue to enter claims and upload/attach receipts until you click “Submit the Claim Form Online.” You may see the below message on step #4. **It is NOT necessary to fax the receipts if you choose to upload.**



- You will receive an email notifying you the claim is received.
Please call us if you have any questions regarding this new procedure. We will be happy to assist you!

Sincerely,
 TLC Administrators
 (800) 533-0113 (510) 795-0858 (fax)