



Submitting Claims Through the RPG Participant Portal

FSA Procedures

- * Claims are processed on an ongoing basis
- * Reimbursement cycles occur twice a month*:
 - * The first business day of the calendar month for claims received between the 16th and the end of the previous month
 - * The first business day after the 15th of the calendar month for claims received between the 1st and the 15th of the current month **
- * Direct Deposit: Approximately 2-3 business days ***
 - * Advantage: Money reaches bank accounts before checks arrive (4 to 7 business days)
- * Claims may be submitted until 3/31 of the following year
- * If claims are pended or denied, participants will be notified by e-mail and asked to resubmit claim/documentation
- * Activity report included with each check

* Expenses paid for by FSA debit card are not subject to reimbursement cycles

** \$35.00 minimum threshold for reimbursement (otherwise held over until the minimum is met, or the Plan Year ends)

*** Participants are responsible for entering accurate direct deposit details. A fee will be assessed for any ACH rejections from your bank

How do I log into the system?

- * Participants can access their accounts by visiting www.rpgconsultants.com. Just click on the **Logins** drop-down menu on the upper right of the home page and choose **FSA/HRA Account**.
- * A Participant created User ID and password are needed to login.
- * New participants will be sent login credentials by RPG Consultants after enrollment forms are processed.

Claim Submission Procedures

- * Claim Submission for Manual Claims (Non-card transactions)
 - * Enter claims online and upload documentation directly to the RPG FSA Participant Portal
 - * Documentation can also be faxed or e-mailed to RPG after being entered online
 - * E-signature certification

Claim Requirements

- * Online Claim Submission
 - * Documentation for claims entered online must be uploaded directly to the RPG FSA Participant Portal, (alternatively it may emailed or faxed)
 - * Only required if benefits card is not used; although the RPG FSA Department reserves the right to request documentation for card transactions
- * Proof that expense was incurred
 - * Participant or dependent name
 - * Eligible provider
 - * Eligible date of service
 - * Eligible expense (Click [here](#) for more info)
- * Proof that payment was made by participant
 - * Credit card slip
 - * Cancelled check (front and back)
 - * Bank or credit card statement, (screenshots of online statements are acceptable)
 - * Statement that expense paid in cash
- * PLEASE NOTE:
 - * All faxed documentation should be submitted on 8 ½ x 11 paper
 - * Claims should not be sent by mail

Logging Into the Claims Portal

Call Us Today! 1.212.947.4800

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RPG Consultants is proud to be a **CEFEX-Certified Recordkeeper** and Third Party Administrator (TPA)

This certification program is sanctioned by the following organizations:



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PLAN PARTICIPANTS

Employees of company-sponsored retirement and benefit plans.



PLAN SPONSORS

Employers who sponsor retirement and benefit plans.



FINANCIAL ADVISORS

Individuals and firms who provide investment guidance.

Logging Into the Claims Portal

RPG CONSULTANTS Register | Login

Home My Accounts Enrollment Search

Navigation
Contact Us
About Us

Welcome to RPG FSA Participant Portal

Through this site, you can manage your benefit accounts all in one place, view transaction history, submit claims online, view your communication history and take advantage of other services. Before you can access your account, you must register with the site and create a username and password.

Login

Username:

Password is entered on next page.

[Forgot your Username? Click here.](#)

[New User? Please click here to create a username and password.](#)

Register
If you have not registered for the site (created a username and password), please do so now.

Log in
If you have registered and you would like to access your account, please log in by clicking the button above.

Contact US
Have a question, then feel free to contact us.

Please note, this site is designed for the most recent version of [Internet Explorer](#), [FireFox](#) and [Chrome](#).

Contact info

Phone: 212-947-4800 x215

Email: fsa@rpgny.com

Enter your password below to sign in to RPG Consultants

Access to this system is restricted to registered users and access is monitored for your protection. Unauthorized access to this system is prohibited and subject to all applicable laws.

Username:

Password:

[Forgot your password?](#)

Claim Submission Process (1 of 4)



John Smith | Logout
New Message

- Home
- My Accounts
- Debit Card
- Enrollment
- Resources
- Communications
- My Profile

Search...

Last Login: 11/7/2014 11:23 AM

- Benefit Account Summary
- Benefit Account Details
- Transaction History
- Reimbursement Request
- Reimbursement Settings
- Pending Claims
- Frequently Asked Questions
- Announcements
- Forms & Documents
- Contact Us

Benefit Account Summary

Year: Select Account:

Medical FSA Account

Year	Annual Election	Total Contributions	Additional Deposits	Payments	Balance	Details
01/01/2015 - 12/31/2015	\$2,500.00	\$0.00	\$0.00	\$0.00	\$2,500.00	View Details

Please note, this site is designed for the most recent version of [Internet Explorer](#), [FireFox](#) and [Chrome](#).

Claim Submission Process (2 of 4)



John Smith | Logout
New Message

Home My Accounts Debit Card Enrollment Resources Communications My Profile

Search...

Last Login: 11/7/2014 11:23 AM

Navigation

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Transaction History

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Reimbursement Request

Please Note: If you would like to upload receipt(s) for a card transaction, please go to the Pending Claims page, select *Card Transaction* from the "View" drop-down and click **Upload** under the receipt column for the transaction.

Please submit only eligible claims for services provided to you or to your legal dependents. For questions about submitting claims please contact the RPG FSA Dept. at fsa@rpgny.com or 212-947-4800 ext. 215.

New Claims

Start Date	End Date	Amount	Claimant	Provider	Receipt
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Add New

Certification:

- I request reimbursement for the attached expenses under the Section 125 and/or 132 Plans established by my Company. I understand that the eligibility of these claims are subject to the rules of the IRS as well as the rules of my Company's plan. I certify that I, or my eligible dependents, have incurred these expenses during the current Plan Year. Furthermore, I declare that these expenses have not been reimbursed from any other source nor do I expect them to be.

Please note: after submitting your claim(s) no edits are allowed.

Submit Clear





Claim Submission Process (3 of 4)

Reimbursement Request

Please Note: If you would like to upload receipt(s) for a card transaction, please go to the Pending Claims page, select *Card Transaction* from the "View" drop-down and click **Upload** under the receipt column for the transaction.

Add/Edit Claim ✕

Please submit only eligible claims provided to you or to your legal dependents. For questions about submitting claims please contact the RPG FSA Dept. at fsa@rpgny.com or 212-947-4800 ext. 215.

Service Dates:	Start Date*	<input type="text"/>		←	End Date	<input type="text"/>		←
Claim Amount *:	\$	<input type="text"/>	←					
Claimant *:		Smith, John	▼					
Reimbursement Method*:		Check	▼					
Provider:	→	<input type="text"/>						
Account Type*:	→	--Select One--	▼					
Receipt File:	→	<input type="text"/>					<input type="button" value="Browse"/>	
		<input type="button" value="Add File To List"/>						
Notes:								

* = required


Claim Submission Process (4 of 4)

Reimbursement Request

Please Note: If you would like to upload receipt(s) for a card transaction, please go to the Pending Claims page, select *Card Transaction* from the "View" drop-down and click **Upload** under the receipt column for the transaction.

Please submit only eligible claims for services provided to you or to your legal dependents. For questions about submitting claims please contact the RPG FSA Dept. at fsa@rpgny.com or 212-947-4800 ext. 215.

New Claims

Start Date	End Date	Amount	Claimant	Provider	Receipt
4/1/2015	4/1/2015	\$200.00	Smith, John	Dr. Good	 Edit

[Add New](#)

Certification:

- I request reimbursement for the attached expenses under the Section 125 and/or 132 Plans established by my Company. I understand that the eligibility of these claims are subject to the rules of the IRS as well as the rules of my Company's plan. I certify that I, or my eligible dependents, have incurred these expenses during the current Plan Year. Furthermore, I declare that these expenses have not been reimbursed from any other source nor do I expect them to be.

Please note: after submitting your claim(s) no edits are allowed.

[Submit](#)

[Clear](#)

Viewing Past Claims

Home **My Accounts** Debit Card Enrollment Resources Communications My Profile Search... Last Login: 11/7/2014 11:23 AM

Benefit Account Summary

Benefit Account Details

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Year: Select Account:

Medical FSA Account

Year	Annual Election	Total Contributions	Additional Deposits	Payments	Balance	Details
01/01/2015 - 12/31/2015	\$2,500.00	\$0.00	\$0.00	\$0.00	\$2,500.00	View Details

Transaction History

Listed below are recent transactions for your accounts. You can filter the results by Year and/or Account Type.

No transactions found.

Service Year:

Account:

[Printer Friendly View](#)

Claims that are displayed with a yellow highlight are claims that were split between multiple benefit accounts.

Tran. Date	Service Date	Description	Type	Claimant	Account / Plan Year	Status	Amount	Claim/Check Number	Receipt
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No transactions found.

Claims that are displayed with a yellow highlight are claims that were split between multiple benefit accounts.

Reissued Payment.

Provider Payment. Mouseover p can see the detailed information.

Payroll Funded Deposit.

Arbitration and Rulings

- * Some claims may be pended or denied due to insufficient documentation or an ineligible expense
- * RPG management will review individual cases in the event that a participant feels a legitimate claim was denied

RPG Resources

- * **Website:** www.rpgconsultants.com
 - * Login to Web-Based FSA System (available 24/7)
 - * Current account balances
 - * Transaction history
 - * “My Account” – change address or contact info, enter banking information to enroll in direct deposit
 - * Information on FSA Plans
 - * Contact page to submit questions
- * **E-mail:** fsa@rpgconsultants.com
 - * RPG FSA Department utilizes a team approach so that all correspondence can be handled by any member of the team.
 - * E-mail generally answered within 1 business day
- * **Fax:** (516) 620-0789
 - * As an alternative to uploading documentation directly through the participant portal, completed claim forms and documentation may be faxed

Questions

- For any additional questions that you may have please contact:
 - Your company's Benefits Administrator
 - The RPG Consultants FSA Dept. at fsa@rpgconsultants.com or 212-947-4800 ext. 215