



Benefit Spending Account Frequently Asked Questions

For Employers

1. How do BCBSOK members obtain a reimbursement claim form?

By visiting our website at www.myBlueElementOK.com and logging in, e-mailing us at FlexHB@luminarehealth.com or calling us at **877-267-3359**.

2. How do members submit a claim for reimbursement?

Submit online at www.myBlueElementOK.com or by using the Benefit Spending Accounts mobile app

- Email the paperwork to:
FlexHB@luminarehealth.com
- Fax the paperwork to **866-514-8287**
- Mail the paperwork to:
Luminare Health
PO Box 25946
Overland Park, KS 66225

3. How can BCBSOK members check their account balance?

Members can access their Benefit Spending Account 24/7 by logging on to www.myBlueElementOK.com or via the mobile app, Benefit Spending Accounts. They may also contact our customer service team at **877-267-3359** or FlexHB@luminarehealth.com.

4. The deduction amount on the member's pay stub does not match the information on the **Blue Cross and Blue Shield of Oklahoma** Health system. How does this get resolved?

Contact our team at flexeligibilityhb@luminarehealth.com. If a correction is required, they will work with you on resolving the discrepancy.

5. Can members BCBSOK request account statements at any time?

Yes. Members can obtain an account statement by accessing the online portal (www.myBlueElementOK.com). Members may also contact our customer service team at **877-267-3359** or FlexHB@luminarehealth.com.

6. Are over-the-counter drugs covered under the BCBSOK members' plan?

Yes. Members can purchase over-the-counter medications - including feminine hygiene products - using their FSA or HRA. There is no need for a prescription. If for any reason their transaction is denied at point of sale, they can manually submit claims for reimbursement.

7. Can BCBSOK members submit a credit card receipt or a balance due statement from their provider in lieu of an itemized statement?

The credit card receipt and the balance due statement do not include the necessary information to process a claim. An Explanation of Benefit form or itemized statement will be required.