

# ROLLOVER / TRANSFER GUIDE

on behalf of Blue Cross and Blue Shield of North Carolina

Blue Cross and Blue Shield of North Carolina is an independent licensee of the Blue Cross and Blue Shield Association.

**HealthEquity**<sup>®</sup>  
Building Health Savings<sup>SM</sup>

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Note: This process is subject to change.

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# Why transfer or roll over your money?



## Convenience:

Through your Blue Cross and Blue Shield of North Carolina (BCBSNC) high deductible health plan, you can benefit from a fully integrated HSA, administered by HealthEquity. With all your funds available in a single account, you can more easily track all of your contributions, distributions and tax reporting.



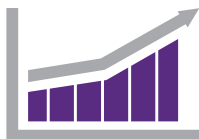
## Avoid fees:

As a BCBSNC HSA plan member, your monthly admin fees are covered. Moving your HSA balance to HealthEquity will help you avoid BenefitWallet monthly fees going forward.



## Get rewarded:

- Earn double interest up to \$25 for transfers or rollovers of \$250 or more.
- Get your \$25 even faster if you transfer or rollover a balance of \$500 or more.
- See terms and conditions listed on page 4.



## Investment options:

You can begin investing when you have a \$2,000 minimum balance; transferring your HSA balance will allow you to invest sooner. A wide array of mutual funds with no investment transaction fees are available and can help you plan for medical expenses now and in the future.

# Transfer credit

We invite you to receive \$25 in credit for moving your existing health savings account (HSA) balance to *HealthEquity*

Take advantage of this limited time offer to transfer or rollover your HSA balance to HealthEquity and receive \$25 in credit to your account. The credit will not count toward your contribution limit for the year, so you can continue to deposit up to the maximum amount allowed by the IRS without worrying about an excess contribution.

## How to request the transfer or rollover:

### *Transfers:*

1. Review the BenefitWallet instructions on page 6. Fill out the BenefitWallet Trustee-to-Trustee Transfer Form on page 7.
2. Submit the completed form to BenefitWallet at P.O. Box 535161, Pittsburgh, PA 15253-5161.
3. You should see the transferred amount in your new HealthEquity account within 3-6 weeks from the date the form is submitted. It may take two business days from the time the funds are posted to be available for use.

### *Rollovers:*

1. Review instructions on Page 8. Fill out the HealthEquity Rollover Form on page 9. Send your completed form to HealthEquity.
2. Your rollover will be posted within two business days of receipt and made available after another 5 business days.

## Terms and conditions:

- To receive double monthly interest up to \$25 you need to transfer/rollover a balance of \$250 or greater.
- To receive the accelerated credit of \$25 offered through BCBSNC you need to transfer/rollover a balance of \$500 or greater.
  - You will begin earning monthly double interest immediately. After 90 days you will receive \$25 minus any double interest earned in the first 3 months.
  - Your HealthEquity establishment date must be on or before 11/1/2015.
  - The transfer/rollover amount must be received within 90 days of your HealthEquity account being established.
  - This offer applies only to Blue Cross and Blue Shield of North Carolina members.

## Transfer versus rollover

1. Transfer - For transfers, BenefitWallet will process your request as a Trustee-to-Trustee transfer and send a check for you directly to HealthEquity. BenefitWallet does charge a \$25 check issuance fee for this service. The funds should be received and available within 3-6 weeks. No tax form will be issued by either party since the transaction is simply a balance transfer.
2. Rollover - You will need to review the rollover instructions in order to complete the process with BenefitWallet and HealthEquity. You can only request one rollover every 12 months. See page 8 for additional details. A 1099-SA tax form will be issued by BenefitWallet to report the distribution and a 5498-SA tax form will be issued by HealthEquity to report the rollover.

## Transferring your HSA dollars

### Transferring your HSA balance is simple:

Transferring your HSA dollars is easy. Complete the steps on this form and BenefitWallet will send a check to HealthEquity.



1. Liquidate any investment assets you may have at BenefitWallet.



2. Complete the BenefitWallet Transfer Form listed on page 7. If you don't have a signature card with BenefitWallet, you will need a notary to sign the form.



3. Send form to BenefitWallet.



4. Receive your funds into your HealthEquity HSA in 3-6 weeks.

Remember, HealthEquity's transfer credit is helping you offset the \$25 check issuance fee from BenefitWallet.



**BenefitWallet™ Health Savings Account  
Trustee-to-Trustee Transfer Form  
Transfer FROM BenefitWallet Health Savings Account**

**Account holder Instructions**

To initiate a trustee-to-trustee transfer of funds from your BenefitWallet Health Savings Account (HSA) to a new custodian or trustee complete this form and send the ORIGINAL form to The Bank of New York Mellon (BNY Mellon) at the address below. **If you do not currently have a signature on file with BNY Mellon you must have your signature notarized.** You should also check with your new custodian or trustee regarding any additional information they may require to process a transfer. BNY Mellon will send funds to the new trustee via check. BNY Mellon will charge your account a check issuance fee\* in accordance with the Health Savings Account Fee and Rate schedule. **Please allow 20 business days for processing.**

**Send this completed and signed form (not a copy) to BNY Mellon at:**

**Mail:**

BenefitWallet  
P.O. Box 535161  
Pittsburgh, PA 15253-5161

**Courier/Overnight:**

BenefitWallet/HSA Operations  
500 Ross Street Suite 154-0510  
Pittsburgh, PA 15262-0001

\* **Note:** A check issuance fee of \$25, or as stated on your rate and fee schedule, will be deducted from the proceeds transferred to the new custodian. If your account balance is less than the check issuance fee or \$25, or as stated on your rate and fee schedule, that has been disclosed, your account will be closed and no check will be issued. Monthly maintenance fees will continue to be assessed in accordance with the disclosures and fee schedule until the account is closed. This may impact the amount of the transferred balance. I understand that I must request a transfer of any funds invested in my BenefitWallet HSA investment account to my BenefitWallet checking account *prior* to submission of this authorization to ensure proper movement of funds and 1099 distribution reporting.



**BenefitWallet Health Savings Account  
Trustee-to-Trustee Transfer Form  
Transfer FROM BenefitWallet Health Savings Account**

**Account holder Information, Transfer Instructions & Authorization**

BenefitWallet Account Number 9 5 0 0

Your account number can be found in the upper right corner of your BenefitWallet Welcome Kit cover letter, monthly statements as well as on your BenefitWallet checks and deposit slips.

**Transfer Request and Authorization**

Transfer 100% of my account balance and close my account\*

Transfer \$ , .

**\* Note:** If your account balance is less than the check issuance fee of \$25, or as stated on your rate and fee schedule, that has been disclosed, your account will be closed and no check will be issued. Monthly maintenance fees will continue to be assessed in accordance with the disclosures and fee schedule until the account is closed. This may impact the amount of the transferred balance.

I understand that I must request a transfer of any funds invested in my BenefitWallet HSA investment account to my BenefitWallet checking account *prior* to submission of this authorization to ensure proper movement of funds and 1099 distribution reporting.

**Transfer funds to:**

Trustee/Custodian Name	HealthEquity, Inc.
Address	15 W Scenic Pointe Dr, Ste 100
City, State Zip	Draper, UT 84020
Social Security Number	

**I authorize BenefitWallet to transact upon my account, to transfer funds from the specified account to the Trustee/Custodian and account as indicated above.**

Account holder Name (Print)	
Account holder Signature	

Notary Public Signature*	On _____ 20__ before me, a notary public, appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document and acknowledged that he/she executed the same. Witness my hand and official seal/stamp,
	Signature _____ Notary Public
Notary Public Stamp or Seal	

\*Required if you do not currently have a signature on file with BNY Mellon



# Rollover your HSA dollars

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BenefitWallet's rollover process will allow you to avoid the \$25 transfer check issuance fee. Here are some simple steps to complete an HSA rollover to HealthEquity.

- 1 You must have a BenefitWallet HSA checkbook.
- 2 Liquidate any investment assets you may have at BenefitWallet.
- 3 Immediately stop using your card, checks or requesting distributions.
- 4 You must call BenefitWallet to close your account at 877.472.4200. They will confirm the closing balance. **NOTE: You must instruct the Service Center Representative to NOT request a check to be produced.**
  - All transactions must clear prior to closure, otherwise your check will be returned for non-sufficient funds.
- 5 Include the HealthEquity Rollover Request form located on page 9 with the check. You can confirm your closing balance prior to writing the check online or through the BenefitWallet IVR.
- 6 Mail your check and form to HealthEquity. Send to the address on the top of HealthEquity's Rollover Request Form.

HealthEquity will issue a 5498-SA tax form to report the rollover and BenefitWallet will issue a 1099-SA tax form for the distribution.



# Rollover Request Form

Mail or fax completed forms to:

**Address:** HealthEquity, Attn: Client Services  
15 W Scenic Pointe Dr, Ste 400, Draper, UT 84020

**Fax:** 520.844.7090

Use the rollover request form to roll over funds into your HealthEquity® HSA that have already been distributed to you from another custodian.

Part I—Primary Account Holder Information			
Last Name	First Name		M.I.
Street Address	City	State	ZIP
E-Mail Address	Daytime Phone ( )	SSN or HealthEquity ID Number (6 or 7 digits) REQUIRED	
Health Insurance Company	Employer Name		

**Part II—Rollover Amount \$** \_\_\_\_\_

**Option 1—Check**  
I have included a check for the amount of the distribution from another HSA. Please make check payable to HealthEquity.  
When you provide a check as payment, you authorize HealthEquity to either use the information from your check to make a one-time, Back Office Conversion (BOC), electronic fund transfer from your account if eligible, or to process the payment as a check transaction. Funds processed via BOC may be withdrawn from your account as soon as the same day your payment is received.

**Option 2—Use the verified electronic funds transfer (EFT) account on file and associated to my HealthEquity® HSA.**

**Option 3—Transfer the funds from the following account.**  
(Note: E-mail address is required for EFT.)

Account type:  Checking  Savings

Financial institution: \_\_\_\_\_

City/state: \_\_\_\_\_

Routing number: \_\_\_\_\_

Account number: \_\_\_\_\_

Your Name  
123 Main Street  
Any Town, USA 54321 1234  
98-123-1/4359

Pay to the order of \_\_\_\_\_ \$ \_\_\_\_\_ Dollars

Your Financial Institution  
400 Countrywide Way  
Simi Valley, Ca 93065

For \_\_\_\_\_

⑆ 1 2 2000 78 9 ⑆ 0123456789 ⑆ 1234

Routing Number      Account Number      Check Number  
(Do not include)

**Form must be accompanied by a copy of a voided or actual check.**

**Rollovers**

A rollover is a way to move money or property from a medical savings account (MSA) or existing health savings account (HSA) to a HealthEquity HSA. The Internal Revenue Code (IRC) limits how many rollovers may be taken, how quickly rollovers must be completed, and how the custodian must report the transaction.

- 1. Timelines**  
The funds you receive from an MSA or HSA must be deposited into an HSA within 60 days of receiving them. When counting the 60 days, include weekends and holidays. Receipt generally means the day you actually have the funds in hand. For example, the 60 days would begin on the day you pick up the check from the Custodian or you receive the check in the mail. The 60 day rule is set by the IRS and cannot be changed by HealthEquity.
- 2. Twelve-Month Restriction**  
You are entitled to one distribution per year per HSA, which may be rolled over to another HSA. Twelve (12) months must pass after receipt of one rollover before you may make another distribution from the same HSA to rollover.



**Move It. Double It.**

Get double interest on your HealthEquity® HSA. Just roll over \$250 or more from another HSA to HealthEquity and get up to \$25 total. Get full details at [www.healthequity.com/DoubleInterest](http://www.healthequity.com/DoubleInterest).

## Questions?

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If you have any questions, HealthEquity Member Education specialists are available every hour of every day at 877.713.7682.

BenefitWallet can also be contacted at 877.472.4200, if you have any questions during the transfer or rollover process.

## *Expert friends*

**Helpful support for our members,  
available every hour of every day**

**877.713.7682**



Blue Cross and Blue Shield of North Carolina (BCBSNC) does not administer your HSA and is not affiliated with your HSA custodian or administrator. HealthEquity, Inc. is an independent entity that provides HSA custodial services. Blue Cross and Blue Shield of North Carolina is an independent licensee of the Blue Cross and Blue Shield Association

HealthEquity®

15 West Scenic Pointe Drive, Suite 100  
Draper, UT 84020  
[www.HealthEquity.com](http://www.HealthEquity.com)

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