

# **HEALTH SAVINGS ACCOUNT DISBURSEMENTS**

Your National Benefit Services (NBS) Health Savings Account lets you pay yourself when you have out-of-pocket medical costs.

The easiest way to pay yourself is to register on the NBS Web Portal and create your account (see pages 2 and 3). This lets you determine how you want to disburse your payment.

Once you have registered and created your online account, you can request disbursement to yourself or directly to a health care provider – whichever is best for you. If you have already paid the provider, then you want to pay yourself. You can direct deposit money to your bank account or have a check mailed to you. Direct deposit is the quickest and easiest way to receive your money. See “Requesting HSA Account Disbursement” on page 4.

**For additional information or assistance contact:  
National Benefit Services  
800-274-0503**

# NBS Web Portal

## How Do I Access My Online Account?

Registering for and logging into your account online is easy. Just follow the instructions below.

### 1 Get to the website

- ▶ Using your Internet browser, navigate to: <http://my.nbsbenefits.com>
- ▶ Click "Register" on the home page. (Highlighted in red below.)

nbs national benefit services

855-399-3035  
service@nbsbenefits.com

SIGN IN REGISTER

Welcome to our new portal. To use the legacy portal, [click here](#).  
The legacy portal will be retired on October 28th.

*If you have an existing username and password, click "Sign In" - there is no need to register again. If you have never registered, click "Register."*

### QuickLinks


Which Plan is Right for Me?	Documents & Forms	Frequently Asked Questions
Short Term Savings	Calculate your Tax Savings	Enroll Here

TRY OUR MOBILE APP

Google play Available on the App Store









## 2 Complete the required fields of the registration form

- ▶ Username and password
- ▶ Personal information - name and email address
- ▶ Employee ID: Please enter your **Social Security Number**
- ▶ Employer ID OR NBS Benefits Card Number.
  - Employer ID is a 9 digit code given to you in your welcome email from NBS, or may be obtained through your employer or by contacting NBS at (855) 399-3035
- ▶ Accept the Terms of Use
- ▶ After completing all required fields, click “Register”

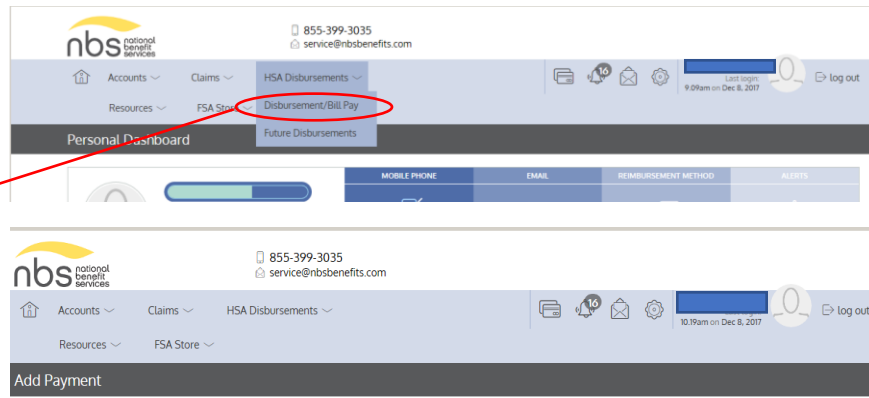
 To register with this site, you must have an **Employee ID** and a **Registration ID**, which is either your Employer's Employer ID or your Benefit Debit Card Number.

Register

STEP 1 > STEP 2 > STEP 3 > STEP 4

 Username *	<input type="text"/>	 Username must be between 9 and 15 characters long alphanumeric value
 Password *	<input type="password"/>	 A valid <b>password</b> must contain between 8 and 16 characters. A password must contain 3 of the following types of characters: <ul style="list-style-type: none"><li>• AN UPPER CASE LETTER</li><li>• lower case letter</li><li>• Special Character (% , ! , @ , etc.)</li><li>• A number</li></ul> A password cannot contain: <ul style="list-style-type: none"><li>• The same character repeating 3 or more times</li><li>• The word "password"</li><li>• The username</li><li>• Spaces</li></ul>
Password Strength		
 Confirm Password *	<input type="password"/>	
First Name *	<input type="text"/>	 <b>Employee ID</b> was assigned by your Administrator and could be your Health Plan Member Number, Social Security Number, an ID provided by your Employer or an alternate ID created by your Administrator. If you do not know your ID or were not provided an ID, please contact your Administrator.
Initial	<input type="text"/>	
Last Name *	<input type="text"/>	
 Email *	<input type="text"/>	
 Employee ID *	<input type="text"/>	
Registration ID *	Employer ID <input type="text"/>	
	<input type="text"/>	
I accept <a href="#">Terms of Use</a>	<input type="checkbox"/>	

# Requesting HSA account disbursement



Step 1: From the blue task bar hover over the 'HSA Disbursements' tab and click on 'Disbursement/Bill Pay'



Step 2: Click on the 'Bill Pay Tab'

You may withdraw funds to your external bank account or you can make a payment to anyone, such as a provider. To withdraw funds and transfer directly to your bank account, select 'Pay Me' below – you must have provided a Direct Deposit Account on the Withdrawal Bank Account page.

**IMPORTANT.** Payment requests are debited from your Health Savings Account on the requested withdrawal date. If a payment is being made to a provider, then the payment will be mailed and will arrive at the payee within 7-10 business days.

Withdrawal Account \* Health Savings Account

Your Payment Request

Pay Someone Else Pay Me

How would you like the funds to be sent to you?

Deposit to my account on file Send me a check

Deposit to Edit Deposit Account

Bank Name Capital One Bank

Account Number [REDACTED]

Routing Number [REDACTED]

Amount \* \$ [REDACTED]

Payment Preferences

Once Weekly Monthly

Send out Payments on \* [REDACTED]

Description [REDACTED]

\*

Submit Cancel

Step 3:  
Read through instructions and if paying yourself back for expenses, select 'pay me',  
Enter 'Amount' requested, Date to receive the disbursement, Sign off that you are responsible for retaining receipts  
When you have selected all you options, click 'Submit'