

USING YOUR BACK-UP CARE BENEFIT

User Guide and FAQ

Last Updated: March 2020



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Introduction

Your *Bright Horizons Back-Up Care*™ benefit is designed to connect you with vetted, high-quality care providers when and where they're needed, to help you get to work, and ensure that your family members are in good hands. This document addresses common questions about back-up care and guides you through the processes of enrolling in and using the program to find care for your child and adult dependents.

Common Questions

Do I need to register in advance of reserving back-up care?

Yes. Registering helps us create the best experience for your family. Registration is required for *Bright Horizons Back-Up Care* and for Crisis Care reimbursement.

What information do I need to provide during registration?

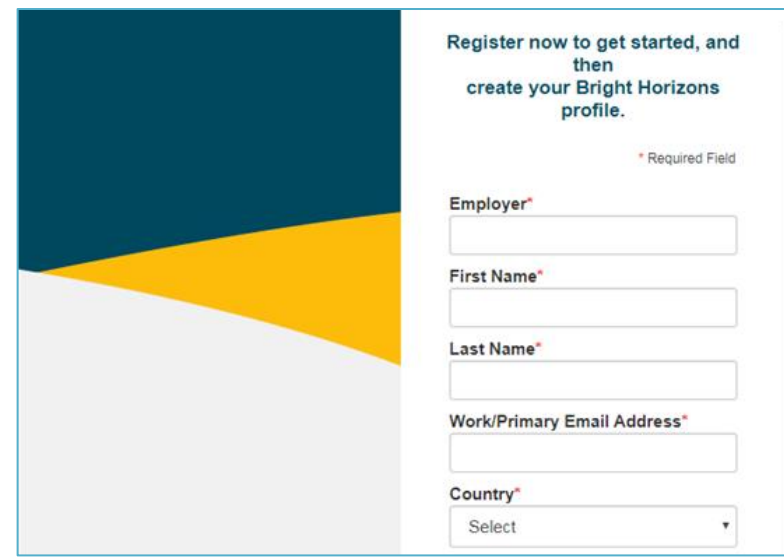
You will create your personal account, add care recipients and authorized contacts, and specify the locations where care is needed. All of this information can be easily amended over time, as needed.

Where do I sign up?

The fastest approaches to enrolling in this benefit are:

- Online (at backup.brighthorizons.com)
- Through the mobile app (search “back-up care” in the [Google Play](#) or [Apple](#) app store)

Registering Online

<p>Visit: backup.brighthorizons.com Click the “First-Time User” button to begin registration.</p>	
<p>You will be asked to verify your Bright Horizons-supplied company information before entering a personal username and password.</p> <p>Employer Username: <UN></p> <p>Employer Password: <PW></p>	
<p>Next, create your account by entering the required information, such as:</p> <ul style="list-style-type: none"> First & last name Work email Mailing address <p>Helpful Hint: After logging in, you will receive a Welcome Email and request to finish completing your registration profile. In order to request care, you need to be fully registered (continue to the next step).</p>	

You will be logged into the Back-Up Care site. From the home page, click “Care Profile” to complete your registration by adding:

- Care recipients
- Care locations
- Authorized users

Helpful Hint: You need to complete your profile before you can make a reservation. Additionally, if you do not finish this step, you may have issues logging back in under your account.

Add Care Recipients by completing all of the required fields, specifying authorized contacts, and clicking the blue “Add Care Recipient” button

Helpful Hint: Your care recipients can include any child, adult or elder loved one that you have direct caregiving responsibility for. Your elder loved one does not need to live with you or even in the same state in order to be eligible for care.

Add Authorized Contacts by completing the required fields, specifying whether those contacts can request back-up care days on your behalf, and clicking the blue “Add Authorized Contact” button

Add locations, including your home and workplace, and specify whether in-home care can be provided at each address.

To save each one, click the blue “Add Location” button

Helpful Hint: If you plan to use in-home care or Crisis Care reimbursement, you can stop here in the care recipient profile and add another care recipient, if needed. If you plan to use center based care, you will need to complete the remaining information (Care forms, medical, dental, etc)

New Location

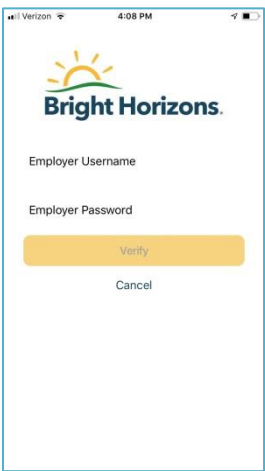
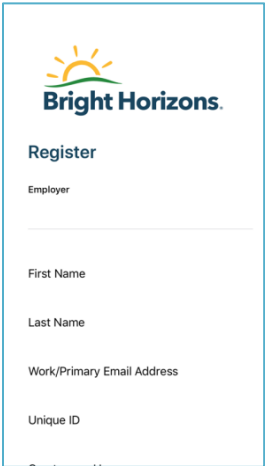
*Required **Required to complete an in-home reservation request

Location Type	<input type="text" value="Other"/>	Zip Code *	<input type="text"/>
Location Name*	<input type="text"/>	City*	<input type="text"/>
Address Line 1*	<input type="text"/>	County*	<input type="text"/>
Address Line 2	<input type="text"/>		
Address Line 3	<input type="text"/>		
Country*	<input type="text" value="Select a Country"/>		

Will there be in-home care provided at this location? No Yes

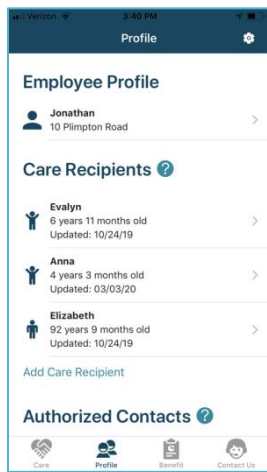
Registering Through the Mobile App

The mobile app is the fastest, most convenient way to enroll in your back-up care benefit. Find the app by searching “back-up care” in the [Google Play](#) or [Apple](#) app store, download it, and register using the following steps.

<p>Step 1</p> <p>Enter your Bright Horizons-supplied company information then click “Verify.”</p> <p>Employer Username: <UN></p> <p>Employer Password: <PW></p>		<p>Step 2</p> <p>Create your user profile by completing the required fields, such as:</p> <ul style="list-style-type: none"> ■ First & last name ■ Work/primary email ■ Mailing address 	
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Step 3

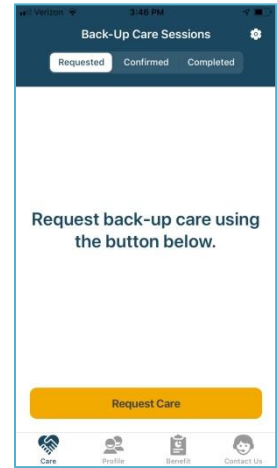
Complete your profile by adding Care Recipients, Authorized Contacts, and Locations.



Step 4

You're ready to begin reserving back-up care! Reserve through the mobile app for care from Bright Horizons' network.

For Crisis Care, find your own care providers and apply for reimbursement using the instructions in the Crisis Care section below.



Reserving In-Home Care

The first step is identifying who needs care. Select the dependent for whom you need to request care.

WHO NEEDS CARE AND WHY?

Please select all recipients that require care. If you have multiple recipients who need different types of care or different days and locations, please complete them as separate reservations.

1. Select a Reason For Care

Care Recipient Recovering from illness or surgery

2. Select Who Needs Care

<input type="checkbox"/> Julie Smith (3yrs 6mths - 8/26/2016)	HEALTH STATUS: <input type="radio"/> Healthy
<input checked="" type="checkbox"/> Jacob Smith (86yrs - 1/26/1934)	HEALTH STATUS: <input checked="" type="radio"/> Healthy

Next, you will select the dates, times, and location where care is needed.

WHEN AND WHERE DO YOU NEED CARE?

1. Select The Date And Time For Care

You can select a single date or multiple dates and the start and end time. Dates with different times should be added separately.

CARE RECIPIENT(S)	DATE(S) OF CARE (MM/DD/YYYY)	START TIME	END TIME
<input checked="" type="checkbox"/> Jacob	3/31/2020	9:00 AM	5:00 PM

ADD ANOTHER DATE

2. Select The Location For Care

Please tell us where you would like care to take place. You can choose to search at or near a location, or you can search for care along a route between two locations.

SEARCH TYPE	DISTANCE	LOCATION	ADD NEW LOCATION
<input checked="" type="radio"/> At/Near a Location	10 Miles	Home	200 Talcott Ave, Watertown, MA 02471
<input type="radio"/> Along a Route			

If you have used in-home care in the past, you can request the same caregiver or another person from the same agency.

You can also provide more details about the care environment to help ensure a successful day of care.

PROVIDER PREFERENCES

If you have a preferred in-home care agency, indicate to the right. If the in-home care agency is not available we will continue to search with other in-home agencies.

If you have a preferred caregiver, indicate to the right. Otherwise please leave blank.

If there is an in-home care agency you do not wish to use, indicate to the right. Otherwise please leave it blank.

Special Instructions (i.e. speaks Spanish)

TELL US ABOUT THE CARE ENVIRONMENT

Helpful instructions to find this location:

Does anyone smoke in the care location?* No Yes

Are there any pets in the care location?* No Yes

Is anyone other than the care recipient(s) expected to be at the care location?* No Yes

You will be able to enter any special care instructions and review your care details before finalizing the care request.

CARE INSTRUCTIONS & INFORMATION VERIFICATION

Please list any special care instructions and verify that the information is up to date and there haven't been any changes to medical information, allergies, or custody/visitation rights. Any changes that you make will be updated in the profile for future reservations.

JACOB SMITH (Last Updated: 3/17/2020)

Care / Special Instructions

Any changes to profile details like allergies, etc.? No Yes

You're all set!
Our team will get to work on your request.

RESERVATION: CAS-5689077-Z0V1B4 (In Progress)

[Home](#) // [Reservations](#) // Reservation CAS-5689077-Z0V1B4

NEXT STEPS

Thank you for requesting a back-up care reservation. If at any time you choose to change providers, please contact us at 877-BH-CARES and your Care Consultant will instruct you on the proper enrollment requirements and assist you with accessing any forms that may be required. A care confirmation will be sent electronically once all care arrangements have been confirmed.

Please note that while our call center operates 24/7, some of our providers do not. As such, requests made during non-business hours for next-day care will be researched promptly, but care may not be confirmed until the provider opens for business.

Based on your care request, you can expect to receive your reservation update or confirmation no later than 06:41 pm on 3/21

What you need for care: you must have up-to-date immunization records and other documents needed for care.

[Cancel Entire Reservation](#)

[Edit/Cancel Care Sessions](#)

Reserving Center-Based Care

If this is your first time using back-up care, click “Make My First Reservation” from the home screen.

You will be guided through a few simple steps to find the best care providers for your family.

The screenshot shows a user interface with a yellow header 'MESSAGE CENTER'. Below it, a message states: 'Your care profile is complete! Make your first reservation now.' There are four icons with green checkmarks: 'EMPLOYEE PROFILE', 'CARE RECIPIENTS', 'AUTHORIZED CONTACTS', and 'LOCATIONS'. A blue button labeled 'Make My First Reservation' is centered below these icons. Below the button is a banner for 'CENTER-BASED BACK-UP CHILD CARE' with an image of a woman and a child. To the right of the banner is text: 'When school's out, you're in between care arrangements, or your regular child care is unavailable, we've got you covered. Schedule high-quality care at convenient child care centers right near home or work.' On the right side of the screen, there is an 'EMPLOYEE PROFILE' section for Justin Fisher, showing 'Back-Up Care Advantage' with '12.00 Days*' and 'Remaining Utilization*'. Below that are sections for 'CARE RECIPIENTS (2)' listing Lennox Fisher and Nasir Fisher, 'AUTHORIZED CONTACTS (1)', and 'MY LOCATIONS (1)'. At the bottom right is a 'FIND CARE NEAR YOU' section with a search bar for location or zip code and a 'Search' button.

The first step is identifying who needs care.

The screenshot shows the 'WHO NEEDS CARE AND WHY?' step. It includes a sub-header '1. Select a Reason For Care' with a dropdown menu. Below that is '2. Select Who Needs Care' with two entries: 'Nasir Fisher (2yrs 3mths - 9/9/2016)' and 'Lennox Fisher (4yrs 7mths - 5/5/2014)', each with a 'HEALTH STATUS: Healthy' indicator. There is an 'ADD A CARE RECIPIENT' button. At the bottom, there is an 'OVERVIEW FOR CARE POLICY' section with explanatory text.

Next, you will select the dates, times, and location where care is needed.

The location could be near your home, your place of work, a relative's home, etc.

The screenshot shows the 'WHEN AND WHERE DO YOU NEED CARE?' step. It includes a sub-header '1. Select The Date And Time For Care' with a table for selecting dates and times. The table has columns for 'CARE RECIPIENT(S)', 'DATE(S) OF CARE (MM/DD/YYYY)', 'START TIME', and 'END TIME'. One row is filled with 'Julie', '3/23/2020', '9:00 AM', and '4:00 PM'. Below the table is an 'ADD ANOTHER DATE' button. The second sub-header is '2. Select The Location For Care' with a dropdown for 'SEARCH TYPE' (set to 'At/Near a Location'), a 'DISTANCE' dropdown (set to '10 Miles'), and a 'LOCATION' dropdown (set to 'Select a Location'). There is also an 'ADD NEW LOCATION' button.

Once you've provided those details, the system will provide any available centers that meet your criteria.

Explore the options, then confirm your selection.

Search Criteria

Book Now Only
Instantly confirm care by clicking "Book Now" for available locations.

Distance: 10 Miles

Near Home
2655 W Midway Blvd
Broomfield, CO 80020

Julie Smith ID
03/23/20 09:00 am - 04:00 pm

RESULTS MAP

Map Satellite

Instant Book
Get instant confirmation of your reservation at instant book centers.
Try this center near you:

- Bright Horizons Montessori at Interlocken**
575 Eldorado Blvd
Broomfield, CO 80021
Mon - Fri: 7:00 AM - 6:00 PM MST
Ages Served: 1 month - 6 years
1.20 mi. away
- Bright Horizons Montessori at Interlocken**
575 Eldorado Blvd
Broomfield, CO 80021
Mon - Fri: 7:00 AM - 6:00 PM MST
Ages Served: 1 month - 6 years
1.20 mi. away
- Bright Horizons at The Ranch Reserve**
11305 Decatur Street
Westminster, CO 80234
Mon - Fri: 7:00 AM - 6:00 PM MST
Ages Served: 2 months - 12 years
4.55 mi. away
- Bright Horizons at Louisville, Colorado**
1818 Centennial Drive
Louisville, CO 80027
Mon - Fri: 7:00 AM - 6:00 PM MST
Ages Served: 1 month - 5 years
4.62 mi. away
- Cadence Academy Preschool Broomfield - #523**
900 East 1st Ave
BROOMFIELD, CO 80020
Mon - Fri: 6:30 AM - 6:30 PM MST
Ages Served: 6 Weeks to 12 Years
3.36 mi. away

You will be able to enter any special care instructions and review your care details before finalizing the care request.

CARE INSTRUCTIONS & INFORMATION VERIFICATION

Please list any special care instructions and verify that the information is up to date and there haven't been any changes to medical information, allergies, or custody/visitation rights. Any changes that you make will be updated in the profile for future reservations.

JULIE SMITH (Last Updated: 3/17/2020)

Care / Special Instructions

Any changes to profile details like allergies, etc.?
 No Yes

You're all set!
Our team will get to work on your request.

RESERVATION: CAS-5689075-J9P8T2 (Confirmed)

[Home](#) // [Reservations](#) // Reservation CAS-5689075-J9P8T2

[Cancel Entire Reservation](#) [Edit/Cancel Care Sessions](#)

What You Need For Care

0646 - BRIGHT HORIZONS MONTESSORI AT INTERLOCKEN

Phone:
303 466 4411

Address
575 Eldorado Blvd Broomfield, CO 80021

Reserving Crisis Care

Crisis Care is a component of Bright Horizons Back-Up Care that is activated by Bright Horizons during periods of extreme circumstances, such as hurricanes, wildfires, and during the COVID-19 pandemic. When Crisis Care is activated, employees can find and select their own caregivers and get a \$100 reimbursement for eligible expenses through their back-up care benefit.

The first step is identifying who needs care.

WHO NEEDS CARE AND WHY?

Please select all recipients that require care. If you have multiple recipients who need different types of care or different days and locations, please complete them as separate reservations.

1. Select a Reason For Care

Select a Reason For Care

2. Select Who Needs Care

<input type="checkbox"/>	 Nasir Fisher (2yrs 3mths - 9/9/2016)	HEALTH STATUS: <input type="radio"/> Healthy
<input type="checkbox"/>	 Lennox Fisher (4yrs 7mths - 5/5/2014)	HEALTH STATUS: <input type="radio"/> Healthy

ADD A CARE RECIPIENT

OVERVIEW FOR CARE POLICY

The purpose of back-up care is to provide you with a means to get to work and be productive when there is a breakdown in the normal care arrangements for your loved ones. In order to utilize this benefit, your request for care must be scheduled during a time you are working. Care may not be used for non-work related purposes, to subsidize cost of your regular care, or for ongoing care.

REMAINING UTILIZATION*

Justin Fisher
Back-Up Care Advantage 12.00 Days*
Current Program 1/1/2018-12/31/2018

Next, you will select the dates, times, and location where care is needed.

The location could be near your home, your place of work, a relative's home, etc.

WHEN AND WHERE DO YOU NEED CARE?

1. Select The Date And Time For Care

You can select a single date or multiple dates and the start and end time. Dates with different times should be added separately.

CARE RECIPIENT(S)	DATE(S) OF CARE (MM/DD/YYYY)	START TIME	END TIME
<input checked="" type="checkbox"/> Julie	3/23/2020	9:00 AM	4:00 PM

ADD ANOTHER DATE

2. Select The Location For Care

Please tell us where you would like care to take place. You can choose to search at or near a location, or you can search for care along a route between two locations.

SEARCH TYPE	DISTANCE	LOCATION	ADD NEW LOCATION
<input checked="" type="radio"/> At/Near a Location <input type="radio"/> Along a Route	10 Miles	Select a Location	

You will see "Crisis Care" displayed as a third care option available during the reservation process.

Check the box acknowledging that you are using Crisis Care and select 'Continue'

Helpful Hints:

After completing this step you will receive a system generated email stating that your request for Crisis Care request has been received. The email will provide next steps.

AVAILABLE CARE OPTIONS

Crisis Care
 Center-Based Care
 In-Home Care

For a limited time, you have access to Bright Horizons Crisis Care. In addition to your regular Bright Horizons Back-Up Care program, you have the option to secure back-up care for your loved ones from within your own personal network, such as a neighbor, friend, or babysitter. Crisis Care is available to assist you in meeting your work obligations during health emergencies, natural disasters, labor strikes, or other crisis events. Here are the details of the current activation:

We are activating Crisis Care Assist due to disruptions caused by COVID-19. CCA is activated for the United States, from 3/20/2020 through 4/30/2020.

For each use of Crisis Care, you can receive a reimbursement stipend of \$100 per day. Any additional costs for the care you arrange beyond \$100 are not eligible to be reimbursed. Any use of the program will count toward your standard number of back-up care visits.

I am electing to use Crisis Care

Back

Continue

You will then be routed to a confirmation page that includes more information about Crisis Care and links to two important forms:

- Release form
- Reimbursement form

CRISIS CARE

[Cancel Entire Reservation](#) [Cancel Care Sessions](#)

Care Sessions

Date/Time	Care Recipient(s)
3/30/2020 09:00 am - 05:00 pm	Julie Smith

STEP 1: CONFIRMATION AND RELEASE

You are not eligible to use Crisis Care until after you submit this completed and signed Confirmation and Release to Bright Horizons.

[Confirmation and Release Form](#)

STEP 2: REQUEST FOR REIMBURSEMENT

Within ten days after the last date of Crisis Care used, you must submit to Bright Horizons a fully completed and signed copy of the attached Request for Reimbursement.

[GO TO REIMBURSEMENT FORM](#)

How Crisis Care Works

Your employer has authorized Bright Horizons® to reimburse you for your use of Crisis Care. Crisis Care is back-up care provided to a child or adult/elder relative by a child care center, family member, neighbor, or other caregiver identified and selected by you who does not provide services within the Bright Horizons Back-Up Care™ network. Crisis Care is available only when activated by Bright Horizons at its sole discretion during national or local health emergencies, natural disasters, or other crisis events.

Bright Horizons will reimburse you \$100/day regardless of the number of care recipients. No other costs can be paid or reimbursed by Bright Horizons in connection with the use of Crisis Care. The use of Crisis Care will count towards all annual limits established by your employer and Bright Horizons for your use of Bright Horizons Back-Up Care.

Step 1: Complete the Release form prior to receiving reimbursement.

Read the acknowledgement and enter your name and today's date.

Confirmation and Release Form

All Fields Required

You are NOT eligible to use Crisis Care until you submit this completed Confirmation and Release to Bright Horizons.

Employee Name: John Smith
City, State, Zip: Watertown, MA 02471

Employee Address: 200 Talcott Ave
Employer: AnyClient

Acknowledgement and Release

I acknowledge that I intend to arrange for a child care center or caregiver identified and selected by me to provide back-up care to my child(ren) or adult(s) on my behalf. I agree that I am solely responsible for determining whether the child care center or caregiver identified and selected by me is qualified and appropriate for the needs of my child(ren) or adult(s). I agree that neither my employer nor Bright Horizons, or their respective employees or agents, are responsible for my use of any back-up care provided, or any child care center or caregiver providing back-up care, under the Crisis Care program. In consideration of the administration of Crisis Care and the reimbursement of a portion of the cost of the back-up care provided, I hereby fully release and discharge both my employer and Bright Horizons, and their respective officers, directors, employees and agents, from any claim for liability or damage arising out of any use of back-up care, or the actions or inactions of any child care center or caregiver providing back-up care, as part of Crisis Care. I agree that the information and representations provided above are accurate, and that I will fully comply with all requirements applicable to the use of Crisis Care.

Employee Full Name: Date: (mm/dd/yyyy)

Step 2: Complete your Request for Reimbursement form for all relevant days of Crisis Care. This can only be submitted after the care dates have passed.

Please note; reimbursement requests must be received within 10 days of the last date of care.

Helpful Hint: Reimbursement is \$100 per day, regardless of the number of care recipients.

Request For Reimbursement Form

All Fields Required

This Request for Reimbursement must be received by Bright Horizons within ten days of the last date of Crisis Care used as identified below. No care used more than forty days prior to the date of receipt by Bright Horizons of this Request for Reimbursement will be eligible for reimbursement. You are not eligible to be reimbursed for Crisis Care until you submit this completed and signed Request for Reimbursement to Bright Horizons with these requirements.

Employee Name: John Smith
Employer: AnyClient

Employee Address: 200 Talcott Ave
Child Care Center/Caregiver Name:

City, State, Zip: Watertown, MA 02471
Reservation Number: CAS-5689348-Y3Q2C0

I confirm that I have used a child care center or caregiver identified and selected solely by me for back-up care for the care recipient(s) identified above on the following date(s):
Care Provider Type: Child Care Center: In-Home Care:

Date(s)	Hours	Minutes	Care Recipient(s)
3/30/2020	8 Hours	0 Minute	Julie Smith

NOTE: If you did not end up using care on any of the dates above, please set the hours to "Care Not Used"

and request Bright Horizons to reimburse me for for the following payments that I made for this care:

Reimbursement Total \$ (Reimbursement Rate of \$100.00/day)

Employee Full Name: Date: MM/dd/yyyy

You're all set! Look for an email within 10 business days outlining how to receive your reimbursement.



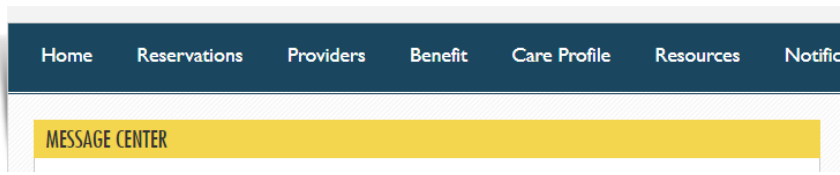
How the Reimbursement Process Works

1. Confirm that you have the correct work/primary email address and home mailing address on file in your back-up care profile.
2. After submitting your Request for Reimbursement, you'll receive an email from Chase Payments (donotreplyChasePayments@jpmorgan.com) within ten business days. The subject line will read "BRIGHT HORIZONS has sent you a payment." Please check your email spam or junk folder if you have not received it within ten business days.
3. Follow the instructions outlined in the email to have your reimbursement transferred directly to your bank account through Zelle. You'll receive your reimbursement on the next business day.
4. Should you decline to accept payment through Zelle, a check will be sent to the home address in your back-up care profile.

Each day of Crisis Care counts toward your annual use allocation as any other back-up care usage would.

Canceling Reservations

You must cancel by 5:00 p.m. local time on the business day prior to the day of care. If care is cancelled after 5:00 p.m. local time on the business day prior to the day of care, you will be charged the use against your annual limit and any applicable copayment will be collected per your employer's benefit parameters.

<p>While logged into your account, click on Reservations</p>	 <p>The screenshot shows a dark blue navigation bar with the following items: Home, Reservations, Providers, Benefit, Care Profile, Resources, and Notific. The 'Reservations' item is highlighted in white. Below the navigation bar, a yellow notification bar displays the text 'MESSAGE CENTER'.</p>
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All active reservations will appear. Click View Reservation to view the specific reservation you would like to cancel

The screenshot shows the 'RESERVATIONS' page with a navigation bar at the top containing 'Home', 'Reservations', 'Providers', 'Benefit', 'Care Profile', 'Resources', and 'Notifications'. Below the navigation bar, the page title 'RESERVATIONS' is displayed. A sub-header indicates 'Viewing 2 of 2' and 'Reservation Type' is set to 'All Active'. Two reservation cards are visible, each with a green umbrella icon and the word 'CONFIRMED'. The first card shows dates from March 23rd to April 5th, 2020, and the reservation ID 'CAS-6513724-YSX7Q4'. The second card shows dates for March 29th, 30th, and 31st, 2020, with reservation ID 'CAS-6514885-50F4D4'. Each card includes links for 'VIEW RESERVATION | DUPLICATE | FEEDBACK' and 'CARE PROVIDERS' and 'CARE RECEIPT'.

To cancel the entire reservation, click **Cancel Entire Reservation**.
To cancel individual dates, click **Edit/Cancel Care Sessions**.

The screenshot shows the details for reservation 'RESERVATION: CAS-6514885-50F4D4 (Confirmed)'. It includes a navigation bar with 'Home', 'Reservations', 'Providers', 'Benefit', 'Care Profile', 'Resources', 'Notifications' (with a 6 notification icon), 'My Account', and 'Help'. Below the navigation bar, the reservation ID and status are shown, along with a 'Requested By' field. At the bottom, there are three buttons: 'Cancel Entire Reservation', 'Edit/Cancel Care Sessions', and 'Duplicate Reservation'.

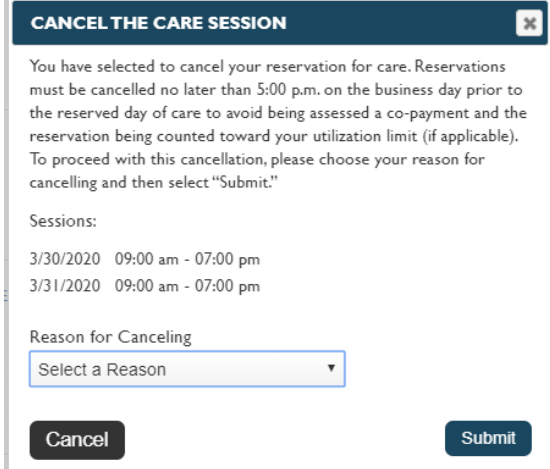
Select the specific sessions you'd like to cancel, and then click Cancel Selected.

Care Sessions


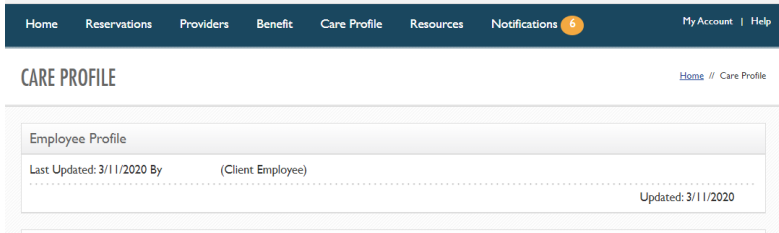
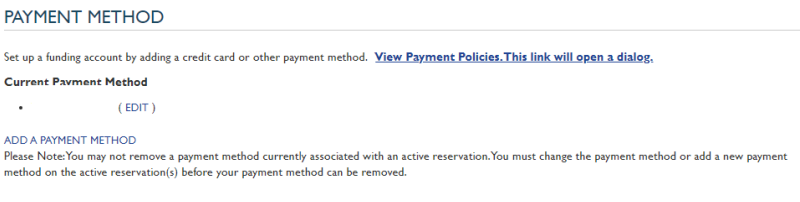
Last Updated: 3/20/2020 4:53:02 PM By Sara Africk (Client Employee)

<input type="checkbox"/>	Date/Time	Care Recipient	Provider	Caregiver	Search Progress	Care Session Status	Supress Email
<input type="checkbox"/>	3/29/2020 09:00 am - 07:00 pm		BrightStar Care - Cedar Knolls / Morris Coun ...		Cancelled Search	Cancelled	No
<input checked="" type="checkbox"/>	3/30/2020 09:00 am - 07:00 pm		BrightStar Care - Cedar Knolls / Morris Coun ...		Confirmed	Confirmed	
<input checked="" type="checkbox"/>	3/31/2020 09:00 am - 07:00 pm		BrightStar Care - Cedar Knolls / Morris Coun ...		Confirmed	Confirmed	

EDIT SELECTED | VIEW SELECTED | CANCEL SELECTED | UNFILLED | UNSERVICEABLE | PROVIDER HISTORY

<p>Select the reason you are canceling care from the drop-down menu, then select Submit.</p>	
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Adding a Funding Account

<p>While logged into your account, click on Care Profile</p>	
<p>Next, click on your name under Employee Profile</p>	
<p>Next, scroll to the bottom of the screen to Payment Method section, and click Add a Payment Method</p>	

Select the type of account (Checking, Savings, Credit/Debit Card) and enter funding account name, name on account/card, and address

CURRENT PAYMENT METHOD

Account Information

Funding Account Name*

Name on Account/Card*

Address Line 1*

Address Line 2

City*

State*

Zip Code*

Payment Information

Account Type.*

Checking Savings Credit/Debit Card

For credit/debit card, enter card number and expiration date

Payment Information

Account Type.*

Checking Savings Credit/Debit Card

Card Number*

Expiration Date*

Month* Year*

For checking/savings account, enter routing number/account number

Payment Information

Account Type.*

Checking Savings Credit/Debit Card

Bank Routing Number*

Bank Account Number*

Click Save to save payment information

Each time you place a reservation, you will be prompted to select a Payment Method, which will be saved in a drop-down on Step 5 of the reservation

Payment Information ADD A FEE

Last Updated: 2/20/2020 7:35:50 PM By _____ (Client, Employee)

Co-payments are payable by credit card, debit card or Electronic Fund Transfer (EFT). Co-payment information is collected on the day care is reserved; co-payments are processed on the day following the utilization. You will need to provide payment information in order to place a reservation request. The applicable charges for services provided will be processed after the services are rendered.

Estimated Summary of Charges *	
Charge Description	Amount Charged
Co-Pay	\$120.00

* This is an estimate based on current reservation details. Charges are subject to change if any reservation details that affect charges are later changed.

Payment Method

ADD/MANAGE PAYMENT METHOD(S)

Please Note: You may not remove a payment method currently associated with an active reservation. You must change the payment method or add a new payment method on the active reservation(s) before your payment method can be removed.