

## First Time Login

### Web Portal Instructions

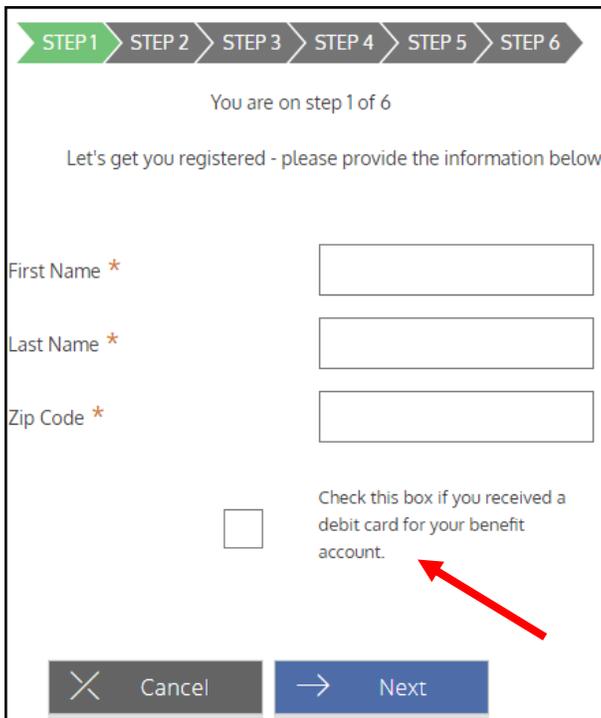
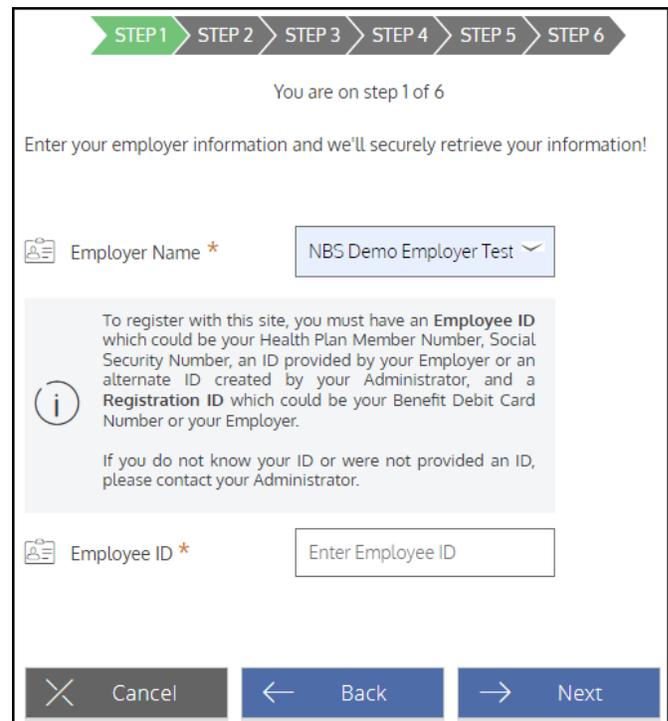
- Direct Deposit
- Adding Dependents

## NBS Web Portal Instructions

- Go to [www.mynbsbenefits.com](http://www.mynbsbenefits.com) and select *register* in the upper right corner.



- Step 1: Complete the required fields on the registration form.
  - Enter first name, last name, and zip code.
  - If you have not received an NBS Smart Card (debit card), you do not need to check the box.
  - If you have received a debit card, check the box, and enter your debit card number in the box.
  - On the next prompt, start entering your employer's name and then select the correct employer from the drop-down menu. Then enter your employee ID.
- Step 2-6: You will have to verify your account with a code sent via email or text. Then create a user profile and security preferences.

A registration form titled 'STEP 1' with a progress bar showing steps 1 through 6. The text 'You are on step 1 of 6' is displayed. Below it, it says 'Let's get you registered - please provide the information below'. There are three input fields: 'First Name \*', 'Last Name \*', and 'Zip Code \*'. Below these is a checkbox with the text 'Check this box if you received a debit card for your benefit account.' A red arrow points to the checkbox. At the bottom are 'Cancel' and 'Next' buttons.A registration form titled 'STEP 2' with a progress bar showing steps 1 through 6. The text 'You are on step 1 of 6' is displayed. Below it, it says 'Enter your employer information and we'll securely retrieve your information!'. There is a dropdown menu for 'Employer Name \*' with the value 'NBS Demo Employer Test'. Below that is an information box with an 'i' icon and text: 'To register with this site, you must have an Employee ID which could be your Health Plan Member Number, Social Security Number, an ID provided by your Employer or an alternate ID created by your Administrator, and a Registration ID which could be your Benefit Debit Card Number or your Employer. If you do not know your ID or were not provided an ID, please contact your Administrator.' Below the information box is an input field for 'Employee ID \*' with the placeholder text 'Enter Employee ID'. At the bottom are 'Cancel', 'Back', and 'Next' buttons.

## Setting up Direct Deposit

- Select *Add* under Direct Deposit Options on the Personal Dashboard, then, fill in your banking information and hit *Save*.



### Direct Deposit Options

Add your bank account for direct deposit reimbursement ⊕ ADD

### Reimbursement Method

Check  Direct Deposit

 Bank Name \*

 Account \*

 Re-enter Account \*

 Account Routing \*

 Re-enter Routing \*

 Bank account type

By providing my bank account and routing numbers, I agree to allow my administrator to direct deposit plan reimbursements into my accounts. I understand that I can change this directive at any time. \*

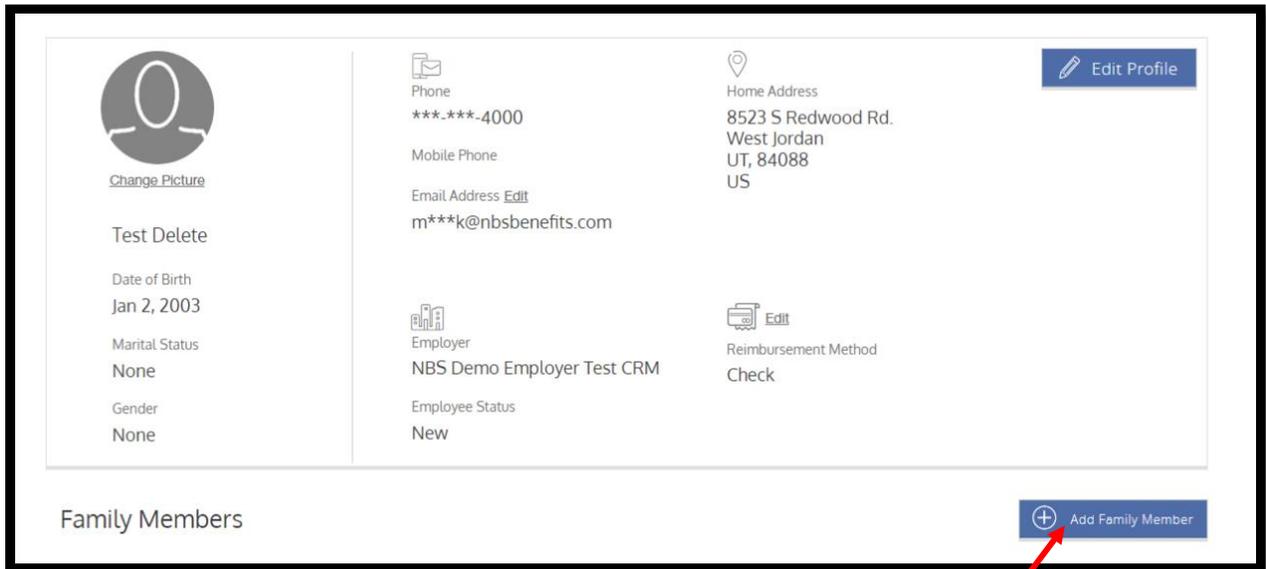
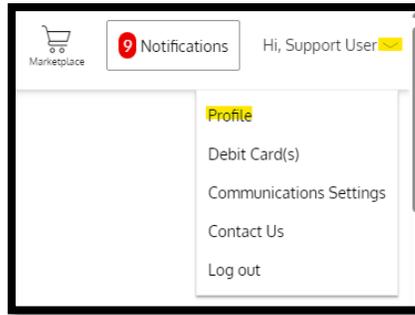
#### Check example

Name \_\_\_\_\_  
Address \_\_\_\_\_ Date \_\_\_\_\_  
Pay to the order of \_\_\_\_\_  
\_\_\_\_\_  
Your bank  
|: 1233211231      234511      123456789123  
|:                      |                      |  
Routing      Check #      Account  
Number                      Number

**Please note:**The order of Routing, Account and Check numbers will vary from financial institution to financial institutions and will not necessarily be in the same order as shown above.

# Add Dependents

While on your NBS Web Portal, open your Profile page.



On the bottom of your profile page, click on *Add Family Member*.

First Name \*  Last Name \*

Initial

General Info Use your primary address

Relationship

Date of Birth \*

SSN \*

Gender \*

Full-Time-Student  Yes  No

Phone

Address 1 \*

Address 2

City \*

State \*

ZIP \*

Country \*

Complete all required fields and click *Next*.

Account Linking

Please un-check the benefit account(s) that Sally Smith will not have access to.

|                                     | Account                   | PlanStart Date | PlanEnd Date | PlanId  | CardEligible |
|-------------------------------------|---------------------------|----------------|--------------|---------|--------------|
| <input type="checkbox"/>            | Flexible Spending Account | Jan 1, 2016    | Dec 31, 2099 | MOCKHSA |              |
| <input checked="" type="checkbox"/> | Flexible Spending Account | Sep 1, 2023    | Aug 31, 2024 | FSA     |              |

No card will be issued.

Uncheck any benefits your Dependent should **NOT** have access to and click *Submit*.