

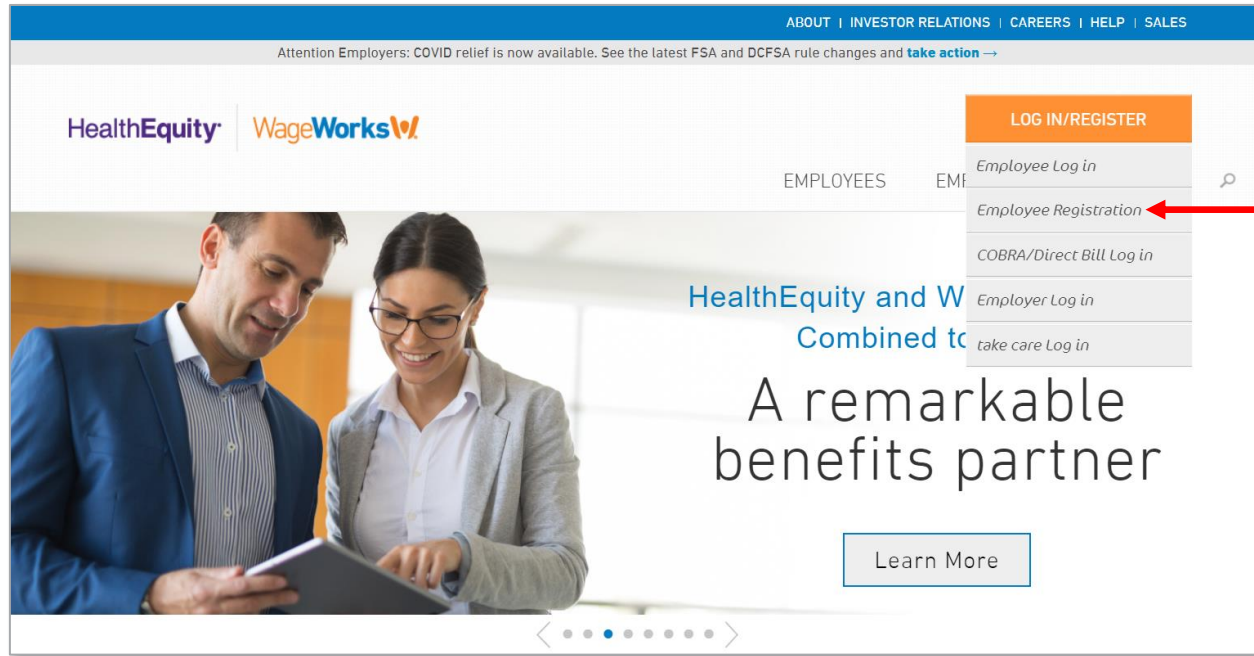
Commuter Benefit Information



Registering online

From the <http://healthequity.com/wageworks> homepage

Click **Log In/Register** → **Employee Registration**



Registering online

- Registration steps outlined

The screenshot shows the 'FIRST-TIME USER REGISTRATION' page for HealthEquity WageWorks, dated February 23, 2021. The page has a header with the logo and a dark bar with the title and date. Below the header is a navigation bar with 'BACK' and 'NEXT' buttons. The main content area is titled 'Instructions' and contains two sections: 'Before You Start' and 'Follow These Steps'. The 'Before You Start' section advises having contact and bank information handy. The 'Follow These Steps' section lists seven steps: 1. Identify Yourself, 2. Accept Policies, 3. Enter / Verify Contact Info, 4. Enter / Verify Reimbursement Method, 5. Select Preferences, 6. Select Username & Password, and 7. Confirm Profile & Preferences.

HealthEquity
WageWorks

FIRST-TIME USER REGISTRATION February 23, 2021

BACK Instructions NEXT

Before You Start
Have your contact and bank information handy.

Follow These Steps

- 1 Identify Yourself
- 2 Accept Policies
- 3 Enter / Verify Contact Info
- 4 Enter / Verify Reimbursement Method
- 5 Select Preferences
- 6 Select Username & Password
- 7 Confirm Profile & Preferences

Registering online

- Registration Screen:
First-time users will be required to provide the following details to authenticate their accounts.

The screenshot shows the 'FIRST-TIME USER REGISTRATION' page for HealthEquity WageWorks, dated February 23, 2021. The page is titled 'Step 1 of 7 Identify Yourself' and includes 'BACK' and 'NEXT' navigation buttons. A message box states: 'Enter the information as it appears in your employer or program sponsor's records. All fields are required.' The form contains the following fields and instructions:

- First Name**: Text input field.
- Last Name**: Text input field.
- Date of Birth**: Text input field with the instruction 'MM/DD or M/D format'.
- Home Zip Code**: Text input field.
- ID Code**: Text input field with the instruction: 'Your ID Code is the last 4 digits of one of the following:
Your social security number
Your employee number
Code provided by your program sponsor'.
- Captcha**: A box showing the characters '741102' and '83104' with the instruction 'Type the characters shown above:' and a corresponding text input field.

Accept the User Agreement

HealthEquity[®]
WageWorks

FIRST-TIME USER REGISTRATIONFebruary 23, 2021

BACK

Step 2 of 7
Accept Policies

NEXT

☐ I accept the [Privacy Policy \(PDF\)](#) and [Terms of Use \(PDF\)](#)

Verify Contact Information

- Confirm and enter email address, physical address, work zip code and phone number

HealthEquity
WageWorks

FIRST-TIME USER REGISTRATION

February 23, 2021

BACK

Step 3 of 7
Enter / Verify Contact Info

NEXT

Enter the residential address where you want us to send you mail.
Do not enter your work address, a PO Box or other non-residential address.
This address will not be communicated to your program sponsor or any other party.
Be sure to update your address here whenever it changes and separately notify all others who need to be aware of your new mailing address.
All fields are required unless noted as optional.

Email 1

example@example.com

An address you check often for time-sensitive and critical info, including confirmations

Confirm Email 1

example@example.com

Email 2 (optional)

An alternative address, preferably a personal account, where we can send time-sensitive and critical information including confirmations and account statements.

Confirm Email 2 (required with Email 2)

Mailing Address 1

1 Main Street

Mailing Address 2 (optional)

City

New York

State

NY

Zip

10037

Ext. (optional)

Used to provide local services, when available.

Work Zip Code

10007

Daytime Phone

Area

212

Prefix

555

Line

1212

Ext. (optional)

A number where we can call for critical issues

Set up Direct Deposit

- HealthEquity recommends selecting the Commuter Card for your Parking and Transit needs. Reimbursement information is needed only if you will be using the Parking Pay Me Back option for commuter. The default is reimbursement by check. You can set up your account for direct deposit at any time. If you do not have your bank account information on hand, click next to proceed to the next page.

HealthEquity WageWorks

FIRST-TIME USER REGISTRATION February 23, 2021

BACK Step 4 of 7 Enter / Verify Reimbursement Method NEXT

Commuter:
You can have your payments deposited into your personal bank account. If you do not elect direct deposit, payments will be made by check to the address in your Profile. All fields are required

Reimburse Payments by ☒ Direct Deposit ☐ Check

HealthEquity WageWorks

FIRST-TIME USER REGISTRATION February 23, 2021

BACK Step 4 of 7 Enter / Verify Reimbursement Method NEXT

Commuter:
You can have your payments deposited into your personal bank account. If you do not elect direct deposit, payments will be made by check to the address in your Profile. All fields are required

Reimburse Payments by ☒ Direct Deposit ☐ Check

Bank Name

Bank Account Number [How to locate bank numbers](#)

Bank Routing Number

Type of Account ☒ Checking ☐ Savings

How to Locate Bank Numbers:
Your sample check may not have these numbers in the exact same location.

Bank Routing # Account # Check #
(Not required for SmartCheck)

Bank Routing Number = 9 digit number located between the @ symbols.

Preferences

- Select how you would like to receive updates, via text, email or mail.

FIRST-TIME USER REGISTRATION February 23, 2021

Step 5 of 7
Select Preferences

How would you like to receive information and updates?
Not all methods are available for all programs and all situations.

☒ Opt out is not available; we are required to communicate to you about these things.
Required = You must choose at least one option in this row.

Activity / Topic	Text	Email	Mail
A claim is processed (required)	☐	☒	☐
A payment is issued (required)	☐	☒	☐
Enrollment, deadline and other important notices (required)	☐	☒	Not Available
New features and product updates (optional)	Not Available	☐	Not Available
Promotional offers and coupons (optional)	Not Available	☐	Not Available

Additional Text Options (Available On Demand / Any Time)
Text the word BALANCE to MYINFO (694636) to request the balance on your account(s).

Text Me @ Mobile Phone Numbers:

Area	Prefix	Line	Service Provider	Nickname (Optional)
			Select Service Provider	Nickname

+ ADD ANOTHER NUMBER

CONFIRM PREFERENCES (REQUIRED)

You certify and authorize the following in regards to your selected preferences:

- ☐ I am free to turn any of these optional features on or off – using this same page – at any time. When a feature is turned on, it will apply to all programs for which I am receiving services.
- ☐ I should print this page and retain a copy for my records.

CERTIFICATION AND AUTHORIZATION

I hereby authorize the program sponsor, the plan or plans, and the plan administrator to disclose any information about any transactions (claims or payments) contained in this system, including descriptions of services received, in order to provide the optional services I have requested.

This authorization applies to any plan or benefits for which I am currently enrolled and any plan or benefits I may become enrolled in while these optional features remain turned on.

I understand that I have the right to revoke this authorization at any time for future disclosures, unless these parties have taken action in reliance upon this authorization. I must revoke this authorization using the same page on this website (select Profile, then Preferences).

I understand that my treatment, payment, enrollment, and/or eligibility is not dependent on my selecting to use these optional features.

I understand that any protected health information (PHI) disclosed as permitted under this authorization is no longer protected under the federal privacy regulations of the Health Insurance Portability and Accountability Act ("HIPAA") and that there is the possibility that any party who receives or intercepts this information may re-disclose it.

This authorization expires when I turn off these optional features and/or when my account discontinues having activity that triggers these features.

I certify that I am the account holder or their authorized personal representative, as defined under HIPAA. By clicking the "Save Changes" button, I am electronically signing this HIPAA Privacy Authorization. This electronic acceptance is intended to qualify as a valid legal signature under applicable law.

Save Changes (I Authorize Sending My Protected Health Information (PHI) In The Manner Selected, If And When Applicable.)

Discard Changes

Create a Username and Password

- Your username must be at least 5 characters long. It may contain any combination of letters and numbers (but no other characters).
- Your password must be between 8 and 20 characters. Include at least one letter and one number. Do not include your last, first or username.

The screenshot shows the 'First-Time User Registration' page for HealthEquity WageWorks. The page is titled 'Step 6 of 7: Select Username & Password'. It features a 'BACK' button on the left and a 'NEXT' button on the right. A message box states: 'We recommend periodic password changes for account security. All fields are required.' Below this, there are three input fields: 'Username', 'Password', and 'Confirm Password'. To the right of the 'Username' field, the requirements are: 'Your username must: Be at least 5 characters long. May contain any combination of letters and numbers (but no other characters)'. To the right of the 'Password' field, the requirements are: 'Your password must: Be between 8 and 20 characters. Include at least four of the following: lowercase letter, uppercase letter, number AND symbol. Not include your last name, first name, username or spaces.'

Confirm Profile and Preferences

HealthEquity
WageWorks

FIRST-TIME USER REGISTRATION

February 23, 2021

BACK

Step 7 of 7
Confirm Profile & Preferences

SUBMIT

Carefully review your information before you submit.
Any errors may delay your order, payments, or other services.

Username and Password

Contact Information

Tammy Transit

1 Main Street
New York, NY 10037

(212) 555-1212

example@example.com

Payments to You *(when applicable)*

By Check

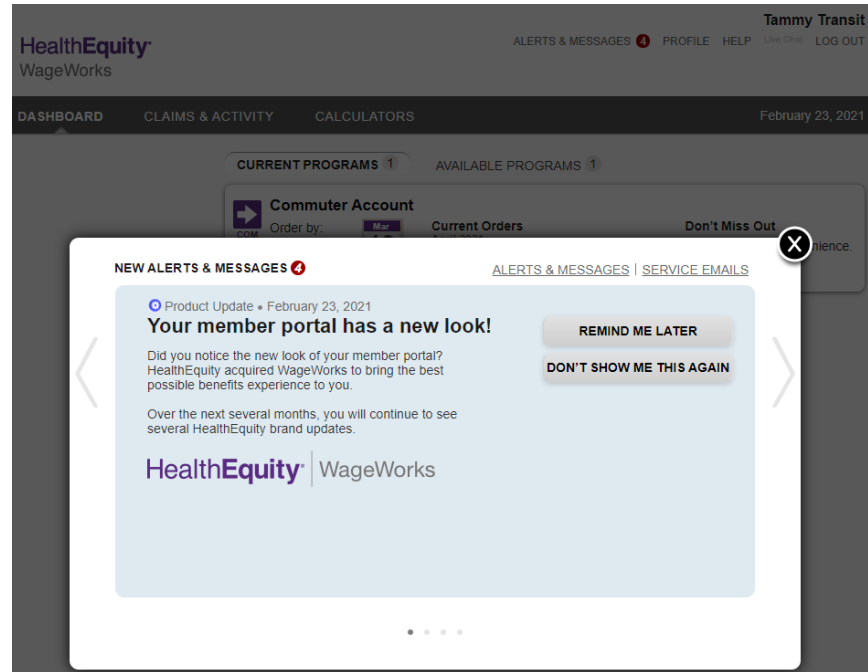
Additional Email Options

None Selected

Text Me Options

0 Texts are On

Click “remind me later” for any alerts



Online Features Dashboard

 DEMO - Commuter Only

ALERTS & MESSAGES **4** PROFILE HELP [Live Chat](#) [LOG OUT](#)

Tammy Transit

DASHBOARD CLAIMS & ACTIVITY CALCULATORS

February 23, 2021

ENROLL IN COMMUTER

CURRENT PROGRAMS **1** AVAILABLE PROGRAMS **1**

**Commuter Account**
Order by: 
11:59 PM ET

Current Orders
April 2021
No Transit Orders **!**
No Parking Orders **!**

Don't Miss Out
On savings and convenience.
PLACE YOUR ORDER

Commuter deadlines

- The program has a monthly enrollment deadline of the 10th of the month
- Make changes or cancel anytime before 11:59 p.m. EST on the 10th of each month
- ~~Example:~~ To participate for the first time, for the benefit month of July 2023, you will need to enroll no later than June 10th.

Transit Orders

HealthEquity®

| WageWorks®

Enroll in Commuter

- Once you select “Enroll in Commuter” or the “Place Commuter Order” link, a box will appear asking for your work zip code. Please enter your work zip code to proceed.

The screenshot displays the HealthEquity WageWorks interface for a user named Tammy Transit. The top navigation bar includes links for ALERTS & MESSAGES, PROFILE, HELP, LIVE CHAT, and LOG OUT. The main header shows the user's name and the date February 23, 2021. Below the header, a dark bar contains a BACK button and the PROGRAM DETAILS title. The left sidebar lists navigation options: PROGRAM DETAILS (highlighted), ABOUT THIS ACCOUNT, PLACE COMMUTER ORDER (circled in red), and FORMS & DOCUMENTS. The main content area features a 'Commuter Account' section with a 'COM' icon, an 'Order by' date of March 10, 2021, and a timestamp of 11:59 PM ET. Below this, the 'Current Orders' section for April 2021 (delivery by March 31, 2021) shows zero transit and parking orders, each with a red exclamation mark icon and the text 'No Transit Orders' and 'No Parking Orders' respectively. A 'Print Current Page' button is located in the top right corner of the main content area.

Enroll in Commuter for Transit

HealthEquity
WageWorks

DEMO - Commuter Only

Tammy Transit
ALERTS & MESSAGES 4 PROFILE HELP LIVE CHAT LOG OUT

BACK

PLACE COMMUTER ORDER

February 23, 2021

PROGRAM DETAILS

ABOUT THIS ACCOUNT

PLACE COMMUTER ORDER

FORMS & DOCUMENTS

Select an option below to place your commuter order



Commuter
Transit

If you use public transportation to commute to work



Commuter
Vanpool

If you use a Vanpool to commute to work



Commuter
Parking

If you pay to park while you are at work

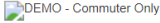


Commuter
Park and Ride

If you park at a train station or bus stop that is part of your commute

Enroll in Commuter





Tammy Transit

ALERTS & MESSAGES ⁴ PROFILE HELP LIVE CHAT LOG OUT

→ BUY A COMMUTER PASS

February 23, 2021

BACK

Instructions

NEXT

Before You Start

Read the [Transit Benefits FAQ](#) and have your contact details ready.

Follow These Steps

1

Select
Provider

2

Select
Product

3

Confirm
Contact
Information

4

Confirm
Order

5

Receive
Confirmation

On your first order, you may need to enter your work zip code. Then select your transit pass operator.

The screenshot displays the 'Tammy Transit' interface for purchasing a commuter pass. At the top, the 'HealthEquity WageWorks' logo is on the left, and user information 'Tammy Transit' is on the right. A navigation bar includes links for 'ALERTS & MESSAGES', 'PROFILE', 'HELP', 'LIVE CHAT', and 'LOG OUT'. Below this, a dark bar indicates the user is in a 'DEMO - Commuter Only' session. The main heading is 'BUY A COMMUTER PASS' with a date of 'February 23, 2021'. The current step is 'Step 1 of 5 Select Operator', with a 'BACK' button. A search section allows filtering by 'ZIP CODE' (with '10037' entered) or 'NAME', featuring a 'SEARCH' button. Below the search bar, a list of 'Popular Operators (8)' is shown in a grid. Each operator entry includes a logo, the operator's name, and a 'SELECT' button.

Operator	SELECT
MetroCard	SELECT
PATH train	SELECT
MTA Metro-North Railroad	SELECT
MTA Long Island Rail Road (LIRR)	SELECT
NJ Transit Bus	SELECT
NJ Transit Rail	SELECT
NJ Transit Light Rail	SELECT
PATH Smartlink	SELECT

Select your transit product or the Commuter Card

HealthEquity WageWorks

Tammy Transit

ALERTS & MESSAGES PROFILE HELP LIVE CHAT LOG OUT

OCMO - Commuter Only

BUY A COMMUTER PASS February 23, 2021

Step 2 of 5
Select Product

BACK

MetroCard
MetroCard
<http://www.mta.info/>

4 Product(s) Available

Premium TransitChek MetroCard
An annual Unlimited Ride MetroCard valid for unlimited rides on MTA NYC Transit subway and local buses for a 12 month period. This MetroCard cannot be used on Express buses.
As long as you are enrolled for this card, you can use this card continuously for unlimited local rides, 7 days a week, 365 days a year. The monthly cost for this annual card is the same as the 30-day Unlimited Ride MetroCard - \$127.00. This product cannot be purchased at MTA ticket vending machines and can only be purchased through WageWorks/TransitChek.
Order by **Mar 10 2021** 11:29 PM ET

Pay-Per-Ride MetroCard
Valid for service on MTA New York City Transit (subway, bus, express bus, Staten Island Railway), New York Bus Service, Queens Surface Corporation, Jamaica, Triboro, and Command Bus Service, and Long Island Bus.
Order by **Mar 10 2021** 11:29 PM ET

Unlimited Ride MetroCard
Unlimited rides for MTA Subway and Bus service.
Order by **Mar 10 2021** 11:29 PM ET

Commuter Card - Transit
A reusable **stored value card** that can be used to purchase MetroCards at MTA ticket vending machines in the New York City Transit Subway System.
[Click here](#) to see a list of other transit providers in your area that accept the WageWorks Commuter Card. [Click here to learn more about the WageWorks Commuter Card.](#)
Order by **Mar 10 2021** 11:29 PM ET

To select your product, click on the product name

- Commuter Card is a stored value card that can be used to purchase tickets or pay for parking. We send you the card, and as you place your monthly or recurring election, HealthEquity will load that election amount on your card for each new election month.
- If you don't use the full value of your monthly election, the credit carries and can be used in a future benefit month.
- If the Commuter Card is accepted at your transit provider selected, the Commuter Card will appear as a transit product you can select.

Select the face value

- If you already use a Transit Smart Card or stored value card from your Transit Authority that can be reloaded, the system will prompt you for the serial number to enter to register your existing reloadable card.

HealthEquity WageWorks

Tammy Transit

ALERTS & MESSAGES PROFILE HELP LIVE CHAT LOG OUT

Step 2 of 5 February 23, 2021

BACK NEXT

BUY A COMMITTEE PASS

Premium TransitChek MetroCard

Your employer will pay 100% (up to \$150.00) of your monthly Public Transportation & Vapour order.

An annual Unlimited Ride MetroCard valid for unlimited rides on MTA NYC Transit subway and local buses for a 12-month period.

The Premium TransitChek MetroCard operates differently than the 30-day Unlimited Ride MetroCard you may have used in the past. The 30-day Unlimited Ride MetroCard is good for 30 days after the 1st day of use, so if you do not start using the card your 30-day period does not begin until that first day of usage. The Premium TransitChek MetroCard is valid for an entire calendar month regardless of usage.

The Premium TransitChek MetroCard is valid on the following systems: MTA New York City Transit Subway and Local Buses, MTA Staten Island Railway, MTA Bus Company (not applicable for Express Services), Nassau Inter-County Express (NICE Bus), Verochender Line Buses (local buses only), Roosevelt Island Tram. Please note: this product does not work on MTA Express buses, PATH trains, or Air Train JFK.

FAQ - Can I cancel this card before the end of my 12 month period?
FAQ - Why should I consider switching to the Premium TransitChek MetroCard versus the 30-day Unlimited Ride MetroCard?
All fields are required.

Span 12 Months

Frequency Every Month

Quantity 1

Total Cost as Selected \$127.00

[PREMIUM TRANSITCHEK METROCARD FAQS](#)

Need more information on the Premium MetroCard? Visit the [NEW YORK RESOURCE PAGE](#)

HealthEquity WageWorks

Tammy Transit

ALERTS & MESSAGES PROFILE HELP LIVE CHAT LOG OUT

Step 2 of 5 February 23, 2021

BACK NEXT

BUY A COMMITTEE PASS

Pay-Per-Ride MetroCard

All fields are required.

Start Date Day of First Use

Face Value Select a Face Value

Frequency Every Month

Quantity 1

Total Cost as Selected \$0.00

[Need help deciding which Product to select? Visit the NEW YORK RESOURCE PAGE](#)

HealthEquity WageWorks

Tammy Transit

ALERTS & MESSAGES PROFILE HELP LIVE CHAT LOG OUT

Step 2 of 5 February 23, 2021

BACK NEXT

BUY A COMMITTEE PASS

Commuter Card - Transit

Value \$

Frequency Every Month

Quantity 1

Total Cost as Selected \$0.00

[Need help deciding which Product to select? Visit the NEW YORK RESOURCE PAGE](#)

HealthEquity WageWorks

Tammy Transit

ALERTS & MESSAGES PROFILE HELP LIVE CHAT LOG OUT

Step 2 of 5 February 23, 2021

BACK NEXT

BUY A COMMITTEE PASS

Unlimited Ride MetroCard

All fields are required.

Service Line Select a Service Line

Start Date Day of First Use

Span Select a Span

Fare Type Adult

Frequency Every Month

Quantity 1

Total Cost as Selected \$0.00

[Need help deciding which Product to select? Visit the NEW YORK RESOURCE PAGE](#)

Attention 30-day Unlimited Ride Customers - New York City Transit is offering an insurance program for your 30-day Unlimited Ride MetroCard when you purchase this card with the Commuter Card at a NY MTA MetroCard vending machine. To learn more about this insurance program, visit the [NY MTA WEBSITE - 30DAYMTA.INFO](#) which has additional information about the program. [TO LEARN MORE ABOUT THE COMMITTEE CARD, CLICK HERE.](#)

Confirm your contact information

- Confirm an email address to receive email confirmation of your order.

The screenshot shows a web form titled "Confirm Contact Information" (Step 3 of 5) for purchasing a commuter pass. The form is for user "Tammy Transit" and is dated February 23, 2021. It includes a "BACK" button and a "NEXT" button. A warning box states: "This address will be used for any orders or communications that we will mail to you. DO enter a residential address where you want to receive this mail. DO NOT enter your work address, a PO Box or a non-residential address. All fields are required unless noted as optional." The form fields are: Mailing Address 1 (1 Main Street), Mail Address 2 (optional), City (New York), State (NY), ZIP (10037), Work ZIP (10007), Daytime Phone (Area: 212, Prefix: 555, Line: 1212, Ext. optional), Email 1 (example@example.com), and Email 2 (optional). A confirmation checkbox at the bottom is labeled "I confirm that this information is accurate".

HealthEquity
WageWorks

Tammy Transit
ALERTS & MESSAGES PROFILE HELP LIVE CHAT LOG OUT

February 23, 2021

BUY A COMMUTER PASS

Step 3 of 5
Confirm Contact Information

BACK NEXT

This address will be used for any orders or communications that we will mail to you.
DO enter a residential address where you want to receive this mail.
DO NOT enter your work address, a PO Box or a non-residential address.
All fields are required unless noted as optional.

Mailing Address 1 1 Main Street

Mail Address 2 (optional)

City New York

State NY

ZIP 10037

Work ZIP 10007

Daytime Phone Area Prefix Line Ext. (optional)
212 555 1212

Email 1 example@example.com An address you check often for time-sensitive and critical info, including confirmations

Email 2(optional)

☐ I confirm that this information is accurate

Confirm your order and click “Submit Order”

BUY A COMMUTER PASS

February 23, 2021

Step 4 of 5

Confirm Order

SUBMIT ORDER

Premium TransitChek MetroCard (P...

Pass	Premium TransitChek MetroCard
Total Cost	\$127.00
Description	An Unlimited Ride MetroCard valid for unlimited rides on MTA NYC Transit subway and local buses and other operators accepting MetroCard for the span of one calendar year.
Span	12 Months

IF THIS IS YOUR FIRST ORDER:

Your new annual Premium TransitChek MetroCard (PMC) will be delivered to you by the 26th of the month before the 1st day of the benefit month. If your card does not arrive by the 26th of the month, please login to your HealthEquity account to request a replacement card. You will be able to select whether you want a replacement card mailed to you or pick up a replacement at the HealthEquity/TransitChek offices in Manhattan. You will not be able to request a replacement before the 26th of the month. Please be aware that there are no reimbursements for the time you are without your PMC.

If you are currently using the 30-day MetroCard, you may want to purchase a Pay-Per-Ride MetroCard to bridge the gap between the time that your current 30-day MetroCard expires and the 1st day of the new benefit month when your new PMC card will be active.

Retain the PMC that you will receive in the mail for use in future months. You will not receive a new one in the mail until expiration of your card.

IF THIS IS A RECURRING ORDER:

Your current Premium TransitChek MetroCard (PMC) will continue to be active and usable for your upcoming benefit month.

Please do not discard the PMC that you are currently using as you will not receive a new one in the mail until expiration.

IMPORTANT INFORMATION ABOUT YOUR PREMIUM TRANSITCHEK METROCARD:

The annual Premium TransitChek MetroCard (PMC) operates differently than the 30-day Unlimited Ride MetroCard you may have used in the past. The 30-day Unlimited Ride MetroCard is good for 30 days after the 1st day of use, so if you do not start using the card, your 30 day period does not begin until that first day of usage. The PMC is valid for an entire calendar month regardless of usage. If you do not use your PMC, your card is still active for that calendar month and you cannot receive a refund for not using the card.

If you lose your PMC or your card becomes damaged, you can login to your HealthEquity account or contact customer service to have a replacement card mailed to you or elect to pick one up at the HealthEquity/TransitChek offices in Manhattan.

Mailing Address/Contact Info	First Benefit Month
Tammy Transit 1 Main Street New York, NY 10037 (212) 555-1212 example@example.com	Apr 1 2021
Change/Cancel Until	Frequency
11:59 PM ET on the 10th of Month One Month Prior to the Benefit Month	Every Month

View Public Transportation & Vanpool Rules

CANCEL

SUBMIT ORDER

Order confirmation – Order complete

- You can change or cancel your order by the 10th of the month prior to the benefit month.
- Passes and cards will be mailed in time for you receive them on the first day of the new benefit month.
- Reloadable transit passes will have funds loaded by the first day of the new benefit month

[BUY A COMMUTER PASS](#)

Step 5 of 5
Thank You

Your Order Has Been Placed
A confirmation email will be sent by the end of the day.
Select NEXT to return to Commuter Program Details.

 **Premium TransitChek MetroCard (P...**

Pass	Premium TransitChek MetroCard
Total Cost	\$127.00
Description	An Unlimited Ride MetroCard valid for unlimited rides on MTA NYC Transit subway and local buses and other operators accepting MetroCard for the span of one calendar year.
Span	12 Months

IF THIS IS YOUR FIRST ORDER:
Your new annual Premium TransitChek MetroCard (PMC) will be delivered to you by the 26th of the month before the 1st day of the benefit month. If your card does not arrive by the 26th of the month, please login to your HealthEquity account to request a replacement card. You will be able to select whether you want a replacement card mailed to you or pick up a replacement at the HealthEquity/TransitChek offices in Manhattan. You will not be able to request a replacement before the 26th of the month. Please be aware that there are no reimbursements for the time you are without your PMC.

If you are currently using the 30-day MetroCard, you may want to purchase a Pay-Per-Ride MetroCard to bridge the gap between the time that your current 30-day MetroCard expires and the 1st day of the new benefit month when your new PMC card will be active.

Retain the PMC that you will receive in the mail for use in future months. You will not receive a new one in the mail until expiration of your card.

IF THIS IS A RECURRING ORDER:
Your current Premium TransitChek MetroCard (PMC) will continue to be active and usable for your upcoming benefit month.

Please do not discard the PMC that you are currently using as you will not receive a new one in the mail until expiration.

IMPORTANT INFORMATION ABOUT YOUR PREMIUM TRANSITCHEK METROCARD:

The annual Premium TransitChek MetroCard (PMC) operates differently than the 30-day Unlimited Ride MetroCard you may have used in the past. The 30-day Unlimited Ride MetroCard is good for 30 days after the 1st day of use, so if you do not start using the card, your 30 day period does not begin until that first day of usage. The PMC is valid for an entire calendar month regardless of usage. If you do not use your PMC, your card is still active for that calendar month and you cannot receive a refund for not using the card.

If you lose your PMC or your card becomes damaged, you can login to your HealthEquity account or contact customer service to have a replacement card mailed to you or elect to pick one up at the HealthEquity/TransitChek offices in Manhattan.

Mailing Address/Contact Info

Tammy Transst
1 Main Street
New York, NY 10037
(212) 555-1212
example@example.com

First Benefit Month



Change/Cancel Until
11:59 PM ET on the 10th of
Month

Frequency
Every Month

One Month Prior to the Benefit
Month

[View Public Transportation & Vanpool Rules](#)

Didn't find the transit option you were looking for?

Select 'cannot find what you are looking for.'

- Provide your information and correspondence is sent to customer service and they will follow up with you regarding your options.

4 Product(s) Available

Premium TransitChek MetroCard
An annual Unlimited Ride MetroCard valid for unlimited rides on MTA NYC Transit subway and local buses for a 12 month period. This MetroCard cannot be used on Express buses.

As long as you are enrolled for this card, you can use this card continuously for unlimited local rides, 7 days a week, 365 days a year. The monthly cost for this annual card is the same as the 30-day Unlimited Ride MetroCard - \$127.00. This product cannot be purchased at MTA ticket vending machines and can only be purchased through WageWorks/TransitChek.

Order by
Mar 10 2021
11:59 PM ET

Pay-Per-Ride MetroCard
Valid for service on MTA New York City Transit (subway, bus, express bus, Staten Island Railway), New York Bus Service, Queens Surface Corporation, Jamaica, Triboro, and Command Bus Service, and Long Island Bus.

Order by
Mar 10 2021
11:59 PM ET

Unlimited Ride MetroCard
Unlimited rides for MTA Subway and Bus service.

Order by
Mar 10 2021
11:59 PM ET

Commuter Card - Transit
A reusable stored value card that can be used to purchase MetroCards at MTA ticket vending machines in the New York City Transit Subway System.

[Click here](#) to see a list of other transit providers in your area that accept the WageWorks Commuter Card. [Click here to learn more about the WageWorks Commuter Card.](#)

Order by
Mar 10 2021
11:59 PM ET

Need help deciding which Product to elect? Visit the [New York Resource Page](#)

I cannot find the pass or ticket I am looking for

Important Tips

- If you are loading funds to your current card
- Be sure that the name on your card matches the name displaying in the HealthEquity system.
- Enter the correct serial #.
- Make sure your card is registered.
- After receiving your new card be sure to come back to the website to place an order for the amount to be loaded to the card each month.

Placing an order with Customer Service

HealthEquity®

WageWorks®

For assistance

- Members may call to place a commuter order at 877-924-3967
- Customer Service Representatives are available 24 hours a day, 7 days a week (excluding holidays)
- You will need to verify your name, zip code and last four of your SSN
- You will need to provide the following:
 - Your work address and zip code
 - Your parking garage location if you park (parking garage remittance address needed for Pay My Provider)
 - Your transit provider information/pass type
- The Customer Service Representative will place your order for you and confirm your order

HealthEquity® | WageWorks®