

Commuter Benefit Login / Sign-Up Steps

1. Navigate to **HealthEquity.com**
2. Select **Login** in the Top Right Corner

The screenshot shows the HealthEquity.com homepage. The navigation bar at the top includes the HealthEquity logo, links for 'For Individuals', 'For Business', 'Products', 'Insights', 'About', and 'HSAnswers'. On the right side of the navigation bar, there are links for 'Open New Account' and a 'Login' button, which is highlighted with a red rectangular box. Below the navigation bar, there is a banner with the headline 'Say hello to smarter, more affordable healthcare'. The banner includes a sub-headline: 'Save, spend, and invest in your healthcare by opening a tax-advantaged Health Savings Account (HSA). Make your first contribution and we'll match \$25!'. There are two buttons: 'Open an HSA' and 'HSA for Business ->'. Below these buttons, it says 'Now includes ACA Bronze plan members'. To the right of the text is a photograph of a woman in a yellow sweater looking at her smartphone. Overlaid on the photo are three data points: 'Health Savings Account \$2,890.12', 'HSA Investments \$5,789.01', and a notification: 'Alice, we're raising the stakes! Complete your annual wellness exam by January 31 and get \$150 in your HSA.' At the bottom of the banner, it says 'Featured on' followed by logos for 'The New York Times', 'benefitsPRO', 'THE WALL STREET JOURNAL', 'MORNINGSTAR', and 'PLANSPONSOR'.

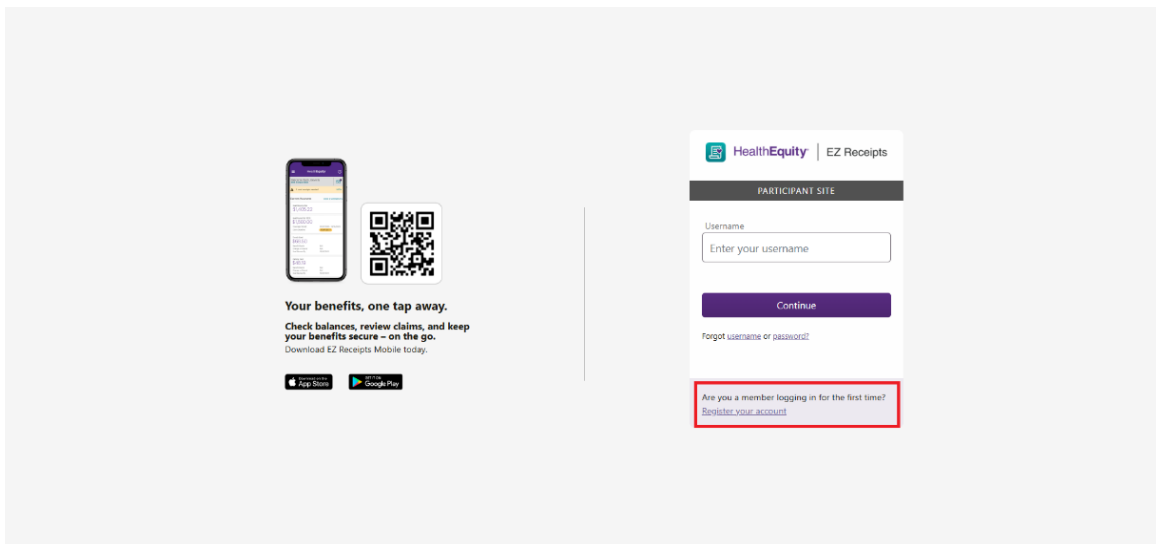
3. Choose **EZ Receipts (formerly WageWorks)**

- Click **Members | For Individuals**

This screenshot is similar to the previous one, but with a dropdown menu open. The dropdown menu is located in the top right corner, below the 'Login' button. It contains the following items: 'HealthEquity' (with a downward arrow), 'EZ Receipts (formerly WageWorks)' (with an upward arrow), 'Members | For Individuals', 'Employer | For Business', and 'COBRA/Direct Bill and more' (with a downward arrow). Below these items is a link: 'Need login or registration help?'. The rest of the page content, including the banner and navigation bar, is identical to the previous screenshot.

4. You'll Land on the **Login Screen**

- Click **Register Your Account**



5. Start **Registration**

- Click **Start**
- Have your **contact and bank information ready**

6. Enter **Contact Information**

- Enter your **personal phone number or work email** exactly as listed in **Workday**

7. Verify Your Account

- A **verification code** will be sent to your **personal phone/work email**
- Enter it here:

The screenshot shows the 'Verify Your Account' page, which is Step 2 of 8 in the online account registration process. The page header includes the HealthEquity EZ Receipts logo, the text 'ONLINE ACCOUNT REGISTRATION', and the date 'May 26, 2026'. Navigation buttons for 'BACK' and 'NEXT' are present. The main content area contains a text box with instructions: 'Verify your account using the one-time PIN you were sent. This step is necessary to confirm your identity and protect your account from unauthorized access. If you did not receive a PIN, use the back button to try a different email or phone number. If you still don't receive one, contact your Employer or Program Sponsor to update your contact information. After updating, you can restart the registration process.' Below this is a 'Verification PIN' input field. A note states: 'Note: Please enter the PIN as soon as possible before it expires.' At the bottom, there is a blue button that says 'Need help? Please contact Member Services at 877.924.3967'.

8. Enter Personal Details

- Fill in your information **exactly as it appears in Workday**
- Use the **last 4 digits of your SSN as your ID code**

The screenshot shows the 'Identify Yourself' page, which is Step 3 of 8 in the online account registration process. The page header includes the HealthEquity EZ Receipts logo, the text 'ONLINE ACCOUNT REGISTRATION', and the date 'May 26, 2026'. Navigation buttons for 'BACK' and 'NEXT' are present. The main content area contains a text box with instructions: 'Enter the information as it appears in your employer or program sponsor's records. All fields are required.' Below this are several input fields: 'First Name', 'Last Name', 'Date of Birth' (with a note 'MM/DD or M/D format'), 'Home Zip Code', and 'ID Code'. To the right of the 'ID Code' field, there is a note: 'Your ID Code is the last 4 digits of ONLY ONE of the following supplied by your program sponsor: 1. Your social security number -OR- 2. Your employee number -OR- 3. The code provided by your program sponsor'. Below the 'ID Code' field is a CAPTCHA image showing the characters '5K6U' and a text box with the instruction 'Type the characters shown above:'.

9. Confirm **Contact Information**

- **Review** and make sure everything is correct
- Select “**I accept**”



ONLINE ACCOUNT REGISTRATION May 26, 2026

Step 4 of 8
Compliance

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

10. Choose **Reimbursement Method**

- **Select** how you want to be **reimbursed**



ONLINE ACCOUNT REGISTRATION May 26, 2026

Step 6 of 8
Enter / Verify Reimbursement Method

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

11. Set **Notification** Preferences

- **Choose** how you want to **receive updates**
- Fill out **all fields**
- Ensure **both** preferences are selected

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)
<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
			Select Service Provider	Nickname

+ ADD ANOTHER NUMBER

Message and data rates may apply. Message frequency varies. Text "HELP" for help. Text "STOP" to cancel.

[Terms of Use](#) [Privacy Policy](#)

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.

12. **Save** Your Information

- Click **Save Changes**

CERTIFICATION AND AUTHORIZATION

This Certification and Authorization is only applicable if, and to the extent that, I am receiving services that are governed by the Health Insurance Portability and Accountability Act ("HIPAA").

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

I understand that any protected health information (PHI) disclosed as permitted under this authorization is no longer protected under HIPAA, that text messages are not encrypted and therefore not secure, 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 representative, as defined under HIPAA.

By clicking the "Save Changes" button, I am electronically signing the HIPAA 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

13. Review and Submit

- **Confirm** all account details are **correct**
- Click **Submit**

HealthEquity
EZ Receipts

ONLINE ACCOUNT REGISTRATION May 26, 2026

Step 8 of 8
Select Username & Password

BACK NEXT

We recommend periodic password changes for account security.
All fields are required.

Username Your username must:
Be at least 5 characters long
May contain any combination of letters and numbers (but no other characters)

Password Your password must:
Be between 15 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, email address, spaces or more than three identical characters.

Confirm Password

14. Once you are **logged in**, you will see your **account homepage**

SPONSORED ACCOUNTS
Total Quality Logistics, LLC

Health Savings Account
\$0.00 Available to spend

Transit
15 Days Left
Order by 06/10 @ 11:59 PM EDT

Parking
15 Days Left
Order by 06/10 @ 11:59 PM EDT

Health Savings Account (HSA)

Reimburse Me Pay Provider View Claims Manage Cards Contribute

Balances
Total Available to Spend
\$0.00
HSA \$0.00
Pending \$0.00

Investments
Once you've saved at least \$2,000.00, you can invest any additional HSA funds to support your long-term financial goals.
Learn more

0% optimized
Optimize My HSA

Shop HSA/FSA eligible products

Save up to 37% using pre-tax dollars¹.

Lose weight
GLP-1s
As low as \$179/mo
NEW lower-dose options

Check your health
160+ lab tests
For \$349 (\$365)
Exclusive member pricing

Boost testosterone
Ease menopause symptoms
Track over 50 health metrics
Dura Kins starting at

Manage your benefits anytime, anywhere with the HealthEquity Mobile app.
Download the app today.
Scan to download

MANAGE ACCOUNT

General Forms
Account Details
Payments
Interest Rates
Contribution History
Dependents & Authorized Users
Beneficiaries
Tax Forms & Statements
Receipts & Documentation

RESOURCES

Prescription Discounts

15. On the left-hand side, click **Parking**

16. Click **Place Parking Order**

SPONSORED ACCOUNTS
Total Quality Logistics, LLC

Health Savings Account
\$0.00 Available to spend

Transit
15 Days Left
Order by 06/10 @ 11:59 PM EDT

Parking
15 Days Left
Order by 06/10 @ 11:59 PM EDT

Parking

Place Parking Order Place Park & Ride Order

P Parking Pass Orders
15 days left to order
Order by
06/10/2026
@ 11:59 PM EDT
for the July 2026
benefit month

\$ Savings
Estimated Savings YTD
\$0.00

⌚ Parking Balances
Credits²
\$0.00

² Balances shared between both transit and parking accounts.

RECENT ACTIVITY [Order History](#)

Date	Order Description	Status	Amount
No activity for this account			

17. **Complete** the Order Steps

- Follow the **6-step process** to submit your parking request

P PARKING May 26, 2026

BACK Instructions NEXT

Before You Start

Have your work location on hand to find nearby parking locations. If you work at multiple locations, choose the location where you pay the most for work-related parking expenses.

Follow These Steps

- 1 Choose Work Location
- 2 Choose Parking Location
- 3 Select Payment Method
- 4 Amount And Frequency
- 5 Confirm Contact Information
- 6 Confirm Order