

## Take Control of your Health Care Expenses with Pre-Tax Dollars



A flexible spending account (FSA) permits you to set-aside funds from your paycheck, without ever paying tax on that money.

## Health Care FSA

Your employer is offering you two accounts. The first is a health care FSA available for reimbursing, tax-free, out-ofpocket medical, vision, dental and hearing expenses for you and your family.

In addition, for your health care FSA only, you may be reimbursed up to the amount you elect for the plan year, at any time, regardless of the amount you have deposited to date. It's like an interest free loan. There isn't another account like it!

A general purpose health FSA provides reimbursement for medical, vision, dental and hearing expenses for the entire family.

Please note, if your spouse contributes to a health savings account (HSA), you should not enroll in the health FSA as it will render your spouse ineligible for the HSA.

A more detailed listing of eligible health care FSA expenses is included in this brochure.

FlexBank Administrators 1250 W. Dorothy Lane, Suite 107 Dayton, Ohio 45409 **Phone: 937.299.5515** Fax: 937.299.7992 Free Phone: 888.677.8373 Free Fax: 888.677.9373

> Mobile: flexbank.net/m Web Site: flexbank.net

## Work-Related Dependent Care FSA

The second account is for work-related dependent care. In order to be considered eligible for reimbursement, the dependent care expense must have been incurred so that you and your spouse, if married, can be gainfully employed. Gainful employment includes being a full time student.

The account may be used for your child, up to age 13, and for adult day care for a spouse, or child age 13 or older, who is physically or mentally incapable of selfcare.

A few examples of eligible expenses are: day camps, nursery schools, before/after school programs, daycare centers and private sitters who claim payment as income on their personal tax return.

A few expenses <u>not</u> considered eligible are: activity fees (i.e. for field trips); late payment fee made to a daycare provider; overnight camp (including the day-time portion); babysitting fees paid for a healthy child while parent is recuperating from an illness (regardless of doctor's advice.); tuition for schooling in kindergarten or higher; care provided by your child under 19 at the end of the calendar year or any other person for whom the employee could claim a tax dependent deduction.

This account is different from the health care FSA in that you may be reimbursed up to what you have deposited to date.





FlexBank Administrators 1250 W. Dorothy Lane, Suite 107 Dayton, Ohio 45409 **Phone: 937.299.5515** Fax: 937.299.7992 Free Phone: 888.677.8373 Free Fax: 888.677.9373

> Mobile: flexbank.net/m Web Site: flexbank.net

# A Flexible Spending Account saves you money.

## The Benefits

As you now know, the money you set aside in your FSA is pre-tax. When you don't have to pay taxes, it's like getting an instant pay raise. The money is deposited into your FSA each pay period through pretax payroll deduction. You then get to make withdrawals for eligible expenses...tax-free!

## The Rules

No one likes rules. But, the rules are easy once you know what they are.

- 1. Plan ahead because you can only elect once a year during your FSA open enrollment period.
- 2. Your elected amount, with few exceptions, can't be changed during the plan year.
- If you have insurance, it must pay first before you can be reimbursed from your FSA. Your FSA can only reimburse what you actually owe, not necessarily what you've paid.
- 4. Any money left in your account at the end of the plan year cannot be returned to you...you have to use it or lose it.

## The Secret of living with the rules.

In order to avoid the "use it or lose it" rule, you should only set aside money in your account you know you will use during your plan year on eligible expenses you know you will be buying anyway. Those are typically repetitive expenses, like a maintenance medication you know you'll take every day. And, predictable expenses, like a pair of glasses you can plan to purchase.

Your dates of service must be during your employer's plan year, so make sure to budget carefully.

## Health Care FSA Sample Eligible Expenses

#### **Eligible Expenses**

Acupuncture Alcoholism / Drug treatment Ambulance charges Arch supports Arthritis gloves Bandages / Band-Aids Bariatric surgery Birthing classes Blood pressure monitors Blood sugar test kits/strips Body scans (MRIs) Brace for knees, wrists, back Breast pumps and supplies Chiropractic fees Compression hosiery Contact lenses & solutions Contraceptives Co-pays / Co-insurance Costs for physical or mental illness confinement

CPAP devices Crutches / cane Deductible expenses Dental implants Dental treatment Dentures Diabetic supplies Durable medical equipment Eyeglasses & eye exam First aid kits Hearing aids & batteries Incontinence supplies Infertility treatment/IVF Insulin supplies Laboratory fees Laser eye surgery Liquid adhesive for small cuts Mastectomy related bras Medical alert bracelet Medical records charges Midwife Mileage Motion sickness wristband Occlusal guards Orthodontia/Invisalign Orthopedic shoe insert Ostomy, colostomy supplies Ovulation monitor Physical therapy Prescriptions Pregnancy test kits Psychiatric care Reading glasses Rehydration solution (Pedialyte for children) Rubbing alcohol Saline solution ("L")

Seeing eye dog & expenses Shipping & handling for eligible medical expenses Smoking cessation programs Special communication equipment for the deaf Speech therapy Sterilization procedures Sunscreen Taxes on medical services & products Telemedicine & online medical consultation Telephone for hearing impaired **TENS** machine Thermometer Transportation expenses primarily for medical care Treatment for substance abuse Vaccines Walkers Wheelchair & repairs X-rays **Dual Purpose Expenses** Requires a doctor's note or

#### Requires a doctor's note or Rx w/ a diagnosis stated Air purifier

Dietary supplements Fitness tracker Health club dues Humidifier Hypnosis Petroleum jelly Massage therapy Vitamins for medical condition Waterpik Weight loss programs

#### Over the Counter Medicines Examples below, all require a valid prescription.

Acne medicine Antacids Antibiotic ointments Anti-itch creams Allergy medicines Cold medicines Diaper rash cream Eye drops Laxatives Lice treatment Motion sickness medicine Pain relievers Smoking cessation products Wart remover treatments Ineligible Expenses "Concierge" annual fee Cosmetic procedures Court ordered DUI class **CPR** class Dental floss Deodorant Diet & weight loss foods Electrolysis Eyeglasses/contacts warranty Face creams & moisturizers Hearing aid warranty Hand lotion Imported drugs Insect repellant Insurance premiums Late fees Marital counseling Maternity clothes Mattresses Medical marijuana Missed appointment fee Mouthwash Non-prescription sunglasses Prepayments Sunglass clips Teeth whitening **Toiletries & cosmetics** Toothbrushes & toothpaste Vitamins for general health

### FlexBank reimburses DAILY!

Within 24 business hours of receiving your claim form and itemized receipts, FlexBank will issue a check, or directly deposit your reimbursement into your personal bank account. It takes two business days for a direct deposit to appear in your bank account. *Review your account 24-7* 

You may view your account balance 24-7 at www.FlexBank.net.

## Call FlexBank!

If you have questions and want to talk with someone in person vs. researching online, please call FlexBank's office Monday – Friday from 8:00 am to 5:00 pm at 888.677.8373.

## Expense Estimate Worksheet

## Enrollment is quick and easy.

Pay close attention to this worksheet. It will help you think of expenses you are already buying that you can now pay with pre-tax dollars. You may also want to review previous year's expenses to help you budget.

Only elect the amount you know for sure you will spend because you don't want to lose any money if you don't use it.

\*Orthodontics: Your plan may be designed to reimburse orthodontic expenses only if you are paying monthly installments to the orthodontist. If your plan is designed this way, you must first submit to FlexBank your orthodontic contract that details your down payment and subsequent monthly payments. Please see your benefits administrator to find out how your plan operates.

## Dates of service are important.

In order to be considered an eligible expense, the date of service must be during your plan year. It does not necessarily matter when you pay for an expense; it is the date that services are rendered that is important.

Dates of service must have occurredyou cannot be reimbursed for pre-paid services not yet rendered. This includes pre-payments as required commonly by dentists and OBGYN providers.

If you terminate during your plan year, dates of service must be while you were employed in order to be eligible for reimbursement.

You have 90 days after the end of your plan year to submit receipts to FlexBank.

## Forms can be found online.

You can find forms on <u>www.flexbank.net</u>. Click For Employees, FSA, Forms Online. Some examples include an Enrollment Form, Claim Form and a Direct Deposit Authorization.

## Account #1: Estimated Health Care Expenses

Madiaa	ľ
wedica	

Doctor office visits Prescriptions Deductibles & co-insurance	
Hearing exams, hearing aids/batteries Chiropractic fees Post-deductible medical	
Dental Fillings Bridges Crowns Dentures Orthodontics* Exams and x-rays	
<mark>Vision</mark> Eye exams Lenses/frames Contact lenses & lens solutions	
Total Health Care Expenses	

## You may use your health care FSA for eligible expenses for your spouse and for your children through the calendar year in which they attain age 26. You can use your health care FSA to pay for the child's medical expenses even if your child is not your tax dependent.

- A child over age 26 may generally be considered your dependent if you provide over 50% of the child's support.
- If you have medical, dental or vision insurance, the insurance must pay their portion first before FlexBank can reimburse what you owe.

## Account #2: Estimated Dependent Care Expenses

Childcare/babysitting service	
Before and/or after school care	
Day camps	
Adult dependent care	
Total Danandant Cana Funancas	

## Total Dependent Care Expenses

- Children are eligible up to their 13<sup>th</sup> birthday.
- The maximum you may contribute per calendar year is \$5,000 if you are single or married and filing jointly. The maximum per calendar year is \$2,500 if you are married and filing separately.
- You may participate in this account if the dependent care enables you and your spouse to continue working.
- In the case of a divorce or separation, only the custodial parent may claim reimbursement for dependent care expenses.
- The individual who provides the care cannot be your spouse, your child under age 19, nor someone you claim as your tax dependent.
- Your provider must claim the income on their tax return.
- You may change your election during the plan year if you have a change in cost or change in provider.



www.flexbank.net Phone: 937.299.5515 Free Phone: 888.677.8373 Free Fax:888.677.9373

# Health Care FSA Grace Period & Debit Card Q&A

### What is a health care FSA grace period?

This feature, called a "grace period", permits you to incur expenses for 2-1/2 months in the new plan year and use up your last plan year funds.

The health care FSA grace period is available to anyone who is a participant on the last day of the plan year.

## If I have \$50 left in my health care FSA after the end of my plan year, am I able to incur new expenses and be reimbursed from the money I have left to spend?

Yes. You may incur expenses for your previous plan year through the 15<sup>th</sup> of the third month after the end of that plan year. For example, calendar year plans that end on December 31<sup>st</sup> have through March 15<sup>th</sup> to incur expenses for the prior year funds.

### How long do I have to submit receipts for the previous plan year?

Your "run-out" period to submit claims for the previous plan year is <u>90 days after the end of the plan year</u>. Your documentation must be postmarked, faxed or mailed by midnight of the 90<sup>th</sup> day.

What happens to the money if it is not used within the plan year plus the 2-1/2 month grace period? Any monies not used will be forfeited.

## Is the 2-1/2 month grace period also available for the work-related dependent care FSA?

No. It is only available for the Health Care FSA.

During the first 2-1/2 months of the new plan year, you will be in what is called the "grace period" for claims submission. During this time, your debit card is only loaded with your new year election. During the 2-1/2 month extension period:

- Claims with dates of service from last year will be reimbursed from last year's unused amounts. You must submit itemized receipts and claim form to FlexBank for reimbursement.
- Claims with dates of service from this year will be reimbursed from this year's elected amount. You may use your debit card for these purchases, or you may submit itemized receipts and a claim form to FlexBank. It's your choice.

If at the end of the 90 day run-out period, there is still an unused balance from last year, FlexBank's system will automatically apply claims incurred during the grace period to the last plan year's remaining balance, if applicable. The grace period funds will then be added to your new plan year health care FSA election on your debit card.

Example: John is a participant in a calendar year health FSA. He has \$50 left to spend on December 31<sup>st</sup> and has the additional 2-1/2 months to incur new expenses for his \$50 balance. He has elected \$500 for the new plan year.

In January, John incurs and submits a \$90 receipt for contact lenses. This \$90 would be reimbursed from the \$500 from the new plan year, leaving a balance of \$410.

In February, John submits another claim for a \$20 doctor office co-pay incurred in December of last year. This amount would be reimbursed from the remaining unused balance of \$50 from last year leaving an unused balance of \$30.

Further assume that John submits no further expenses during the grace period for expenses incurred in either plan year. Shortly after the close of the grace period, FlexBank's system will re-assign \$30 of expenses incurred during this year to use up the remaining unused balance of \$30 from last year leaving him \$0 left to spend for last plan year. John's remaining unused balance from this year would then be increased from \$410 to \$440.

How does the grace period affect my eligibility to own/contribute to a health savings account (HSA)? In general, if you, or your spouse want to be eligible to own/contribute to an HSA, you must have a zero balance in a *general purpose* health care FSA by the end of your FSA plan year in order to be HSA-eligible on the first day of your new plan year. Call FlexBank to discuss in detail how the grace period may affect you.

Please contact FlexBank should you have further questions about the health care FSA grace period.



# How Does My Health Care Debit Card Work?

Your debit card gives you immediate access to your full annual health FSA election at any time during the year! When you pay for qualified expenses, you don't have to worry whether or not you have money in your own bank account. The downside? Just a few rules you will need to remember. They aren't difficult, but they are required just the same.

### Do I have to send FlexBank my receipts? I thought it would be paperless.

Yes, other than flat dollar copays and prescriptions, the IRS requires itemized statements be submitted for debit card swipes. An itemized statement is one that shows the date of service, services rendered, patient name and the amount insurance paid. The IRS requires itemized documentation to prove the purchase is an eligible expense, the date of service has occurred within your plan year and insurance has made their payment. If documentation is required, FlexBank will send a letter or an email letting the participant know the amount of the expense and an itemized statement is required.

### **Insurance Must Pay First!**

When you have insurance, whether it is for medical/vision/dental, and you are responsible for some of the expense, the insurance company must process the claim/procedure first before the card can be used. Many dental offices are asking for a partial payment up front before they will do any work. You cannot use the card for that payment because the insurance company has not processed the claim yet even if the dental office has a "Predetermination of Benefits" from your insurance company.

### What if I don't send in itemized statements?

The card will be suspended until itemized statements are received. Once a letter or an email is sent, you have approximately 50 days to submit the paperwork to FlexBank. If the item purchased is deemed ineligible, you must repay your employer and the money will be added to your debit card for a future expense.

### What can I purchase with my debit card?

The debit card can only be used for IRS approved medical, vision, dental and hearing expenses that have dates of service within your current plan year. If you have a "limited" FSA, you may use your card for dental and vision expenses only. Cosmetic services are NOT eligible whether you use your debit card or not. If you are unsure of something, please call FlexBank for guidance or visit our website, <u>FlexBank.net</u>, we are here to help.

### Can I use my debit card to pay for over-the-counter (OTC) medicines?

No. You will need to submit a doctor's prescription to FlexBank in order for these items to be considered eligible. Therefore, the debit card will not work when you try to purchase OTC medicines with your debit card.

#### Where can I use the card?

The card will only work at places that provide medical, vision, dental or hearing products and services. Some examples are doctor's offices, dental offices, hospitals and pharmacies.

#### Why won't the card work?

A few reasons: 1) you don't have enough funds left for the purchase, 2) the provider is typing in your debit card manually and does not enter the three digit code on the back of your card, 3) the credit card machine isn't coded for your expense, i.e. a collection agency, PayPal, etc. or 4) your debit card has been suspended. You should always be prepared to pay for the expense out of your pocket and then submit an itemized statement to FlexBank for reimbursement.

#### How do I check my account balance?

Login to <u>MyBenny.com</u>. You'll need to enter your Member ID (it's your SS# number without dashes). You might notice "WEX" branding, MyBenny.com will be migrating to <u>My.WEXHealthCard.com</u> in the future, but both website addresses are functional. This site enables you to track the documentation being requested and why your card might be suspended.

### Can I walk into FlexBank with an expense I paid for out-of-pocket and receive a check on the spot?

FlexBank is not able to reimburse you on the spot if you have a health debit card. We can process a claim received in the morning the same day for pick up and have a check ready for you after 4:00 pm. If you fax or email the claim ahead of time, we recommend you call to verify receipt.

#### Debit card replacement or additional cards?

If you lose your debit card or are in need of more than two cards, you may order them. The fee for an additional two (2) cards is \$5.00 and will automatically be deducted from your flexible spending account balance.

