Using Your FSA Funds

Using Your HealthTrust Benefit Advantage Debit Card

If you enroll in a Health FSA or a Dependent Care Account, you will receive a set of two Benefit Advantage Debit Cards. The Benefit Advantage Debit Card will work for amounts that do not exceed the available balance in your Health FSA or Dependent Care Account.

Documenting Charges

Charges made to the Benefit Advantage Debit Card are only conditionally reimbursed until any required receipts are received and approved by HealthTrust per Internal Revenue Service (IRS) regulations. Within 14 days of using the Benefit Advantage Debit Card to pay for an approved FSA expense, you may need to provide documentation of the expense to HealthTrust.* If required, documentation can be in the form of a bill, receipt of payment explanation of benefits, or written statement from an independent, third party.**

*Documentation is not required if the expense equals the copayment amount required by 1) your employer’s medical plan for a doctor’s office visit, or 2) your employer’s pharmacy plan for a prescription. Also, if a retail store uses an Inventory Information Approval System to verify if a purchased item is on the IRS list of eligible expenses (through the item’s SKU number), documentation of that purchase is not required. If documentation is not provided proving the eligibility of the expense as required, IRS regulations require that debit card privileges must be revoked.

**Save Your Receipts!

You should keep all receipts for purchases associated with your FSA expenses. HealthTrust may request copies of your documentation to verify a debit card purchase.

3-to-5-day turnaround time

Reimbursements are made payable to you, either by direct deposit or paper check. You can submit claims in a variety of ways:

- Submit online through your secure Benefit Advantage account at www.healthtrustnh.org.
- Download the Benefit Advantage mobile app to submit through your mobile device.
- Complete a paper claim form to submit via fax, secure email, or mail.

Reimbursement is provided three times per week.

All claims reimbursement requests require you to submit documentation.**

Electronic and Paper Claims

Reimbursement Requests

5 Things Every Receipt Needs to Have

1. Name & address of service provider
2. Date service & expense were incurred
3. Name of person receiving the service
4. Detailed description of service provided
5. Amount charged for service

What is a Flexible Spending Account?

Authorized by the Internal Revenue Service (IRS), a Health FSA allows you to pay for qualifying healthcare expenses while a Dependent Care Account allows you to pay for qualifying childcare or eldercare expenses, each with pre-tax dollars. Contributions to these accounts are directly withheld, and qualifying reimbursements are also not taxable to you. Using pre-tax dollars to reimburse yourself for things like health plan deductibles, copayments, out-of-pocket dental and vision expenses, full-time daycare, after-school care and summer day camp expenses can mean significant savings for you!

This brochure summarizes how these accounts work and is designed to help you decide whether to participate.
**Health FSA**

**Why Enroll in a Benefit Advantage Health FSA?**

For your out-of-pocket medical, prescription, dental, vision and hearing expenses. A Health FSA can help you manage your health expenses, provide you the peace of mind of knowing you have funds available when health issues arise, and it can save you money, too. The specific terms and conditions of the Health FSA benefit are included in the Section 125 Flexible Benefits Plan Document, available from your employer.

Some benefits of participating include:

- Increase your spendable income by reducing the amount you pay in taxes. The funds you contribute to your Health FSA are not subject to federal income or FICA taxes, so most people can save up to 20 percent (depending on individual tax situations) on all qualified medical expenses paid for with Health FSA money. Your pre-tax contributions to the account will be withheld directly from your paycheck.

- You're allowed to contribute up to $2,750 per plan year (depending on your employer's plan design).

- The full amount of your Health FSA election is available on the first day of your plan year, giving you the peace of mind of knowing you have money available when you need it.

- You can use Health FSA funds to pay for:
  - Copays, coinsurance, deductibles
  - Prescriptions
  - Dental and orthodontia services
  - Eyeglasses and Contact Lenses
  - Physical Therapy
  - Over-the-counter supplies
  - Other medical, dental, vision and hearing products and services

- You're allowed to contribute up to $2,750 per plan year (depending on your employer's plan design).

**Additional Resources**

We have resources to help you, including a list of Healthcare Eligible Expenses and an Election Worksheet, at www.healthtrustnh.org. Go to the upper right corner of the website and click the Forms and Documents link.

**Enrolling in a Benefit Advantage Health FSA is Easy!**

Once you have met the eligibility requirements established by your employer, you have the opportunity to enroll in the Health FSA during your initial or annual open enrollment period. To enroll, simply decide how much you'd like to contribute and complete and submit the FSA enrollment form provided by your employer.

**Dependent Care Accounts**

**Why Enroll in a Benefit Advantage Dependent Care Account?**

For your expenses related to dependent daycare. A Benefit Advantage Dependent Care Account can help you manage your qualifying childcare and/or eldercare expenses.

- You can use your Dependent Care Account to pay for:
  - Childcare
  - Before-school and after-school programs (kindergarten and grade school expenses are not eligible)
  - Summer day camps
  - Adult daycare
  - Contribute up to $5,000 per calendar year per family (depending on your employer's plan design).
  - Convenience! Your pre-tax contributions to the account will be withheld directly from your paycheck.

**Enrolling in a Benefit Advantage Dependent Care Account is Easy!**

Once you have met the eligibility requirements established by your employer, you have the opportunity to enroll in the Dependent Care Account during your initial or annual open enrollment period. To enroll, simply decide how much you'd like to contribute and complete and submit the FSA enrollment form provided by your employer.

1. Your funds must be used for eligible expenses incurred with a qualified provider.
2. Services have to be incurred already – not in the future.
3. Services must be for you or a qualified family member.
4. Expenses must be incurred during the period of coverage, including a grace period, if applicable.
5. Expenses must be substantiated with itemized receipts.
6. IRS regulations stipulate a “use-or-lose” rule that requires participants to use all of their designated FSA funds during the plan year (or during the 2½-month grace period immediately following the plan year, if elected by your employer), or forfeit remaining balances. Some employers offer an option of a $500 carryover for the Health FSA, in place of the optional grace period. Check with your employer.
7. You have up to 90 days after the period of coverage ends to submit claims incurred during the period of coverage.
8. Expenses cannot otherwise be reimbursed through any other source.
9. Your pre-tax FSA contributions result in a slight reduction in your Social Security earnings. However, this potential reduction is typically more than offset by up to 20-35% in tax savings you can experience.
10. Once enrolled in an FSA, you cannot change your payroll deduction amount until the next open enrollment period except if you experience a change in employment or family status such as a marriage or a birth.

**Important Points About Benefit Advantage Health FSAs and Dependent Care Accounts**

Please Note: Only the amounts you have contributed are available for reimbursement. Unlike a Health FSA, where your full election amount is available on the first day of the plan year, your Dependent Care Account funds are only available as they accumulate through payroll deductions. Funds must be in your Dependent Care Account before you can receive reimbursement.

**Dependent Care Eligible Expenses**

A dependent care expense is incurred at the time the service is furnished and not when you are billed, charged for, or pay for the service. The expenses must enable a single parent or both spouses to work or attend school on a full-time basis. The care provided must be for a qualifying dependent (such as a child), and the payment made to a qualifying provider (an individual or dependent care center that is in compliance with state and local law).

Please note these important tax considerations:

- You may be required to furnish the tax identification number (or Social Security number) of your provider in order to receive pre-tax treatment for their fees.
- The IRS Child and Dependent Care Credit allows for a percentage of eligible expenses to be applied as a tax credit toward your personal income tax responsibilities. You can’t claim the Child and Dependent Care Credit for the same expenses for which you were reimbursed through your Dependent Care Account. However, you may be able to use the credit for amounts above and beyond those used from the account.