

beniversal[®]
by Benefit Resource, Inc.

Flexible Spending Accounts (FSAs)



Why FSA?

- To save on taxes!
- When you elect to put money into an FSA, your election will be deducted from your paycheck on a pre-tax basis.
- This lowers your taxable income.
- Use the money to pay for expenses you know you will have to pay.



Tax Savings Example

Anticipated medical expenses **\$2,000**

Annual Income **\$35,000**



	<u>Without an FSA</u>	<u>With an FSA</u>
Taxes paid*	\$10,850	\$10,230
Take home pay	\$22,150	\$22,770

Annual Savings

\$620

**Assumes 25% Federal tax and 6% state tax*

How does it work?

- Make your election for each type of account.

Medical FSA



Dependent Care FSA



- Your election will be deducted from your pay in equal amounts throughout the year.
- Your entire Medical FSA election will be available on the first day of the plan year.
- You have 90 days after the plan year ends to submit claims.
- A Dependent Care FSA (DCA) is a “Cash Balance” account

Deductions – Prior Payments = Available Balance

- DCA claims must be submitted within the designated time period for your plan.
- Claims will not be paid until the service has been provided.

Important Plan Information

- Plan Year: 01/01/2019 to 12/31/2019
- Plan Limits:
 - Medical FSA: Maximum \$2,650
 - Dependent Care FSA: Maximum \$5,000
 - Runout Period: There is a 90 Day Runout Period after the end of the plan year to submit any claims for reimbursement incurred during the plan year (3/31/20).
 - Once that period is closed, you are able to Roll Over up to \$500 of unused medical FSA funds into the next plan year.



Eligible Medical FSA Expenses

Reimbursable Expenses	Non-Reimbursable Expenses
Co-pays	Items for General Health
Deductibles	Vitamins
Dental Expenses	Gym Dues
Over the counter medication WITH a prescription	Over the counter medication without a prescription
Prescription eyeglasses	Teeth whitening
Orthodontia	Cosmetic treatments
Contact lens supplies	Sun tan lotion
Orthotics	

And much more

OTC Lists and Eligible Expense Lookup Table available at:
www.BenefitResource.com



Eligible Dependent Care FSA Expenses

- Care must be for dependents under age 13, or an adult dependent incapable of self-care.
- Care must enable you (and your spouse if you're married) to work, look for work, or attend school full-time.
 - Child Care
 - Nursery School
 - Before/After School Care
 - Summer Day Camp (No overnight camp)
 - Adult Care
 - In-Home Dependent Care



Before you Enroll

Determine how much you will elect

- Understand what election limits apply
 - Medical Flexible Spending Account - \$2,650
 - Dependent Care Flexible Spending Account - \$5,000
- Estimate what you spend on health care and dependent care expenses
- Be conservative
 - Don't elect more than you're sure you will spend during the Plan Year.
 - For the Medical FSA any unused funds over \$500 are forfeited.
 - For the Dependent Care FSA all unused funds are forfeited.



Once Enrolled: You will receive a Beniversal[®] Prepaid MasterCard[®] to use for eligible medical expenses.



- Your card will be mailed to your home address.
- Activate your Beniversal Card by calling the number on the activation label or online at www.BenefitResource.com.
- Use your card at the doctor's office, pharmacy, or other medical provider.

Save all Receipts and Documentation



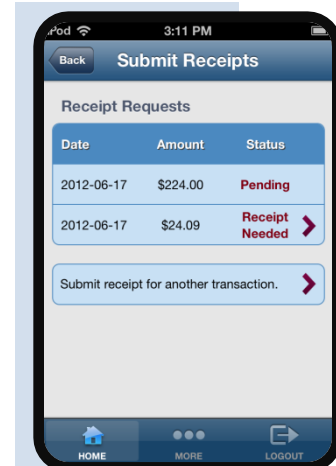
- Always retain receipts and supporting documents (e.g. invoices, statements, explanation of benefits).
 - The IRS requires Benefit Resource to verify that all funds are used for eligible expenses. A series of rules and processes allow Benefit Resource to verify certain transactions. When a transaction cannot be verified, a receipt will be requested.

- An itemized receipt or documentation must contain:
 1. Name of Provider
 2. Patient Name
 3. Type of Service
 4. Date of Service
 5. Out of Pocket cost after any insurance

Note: Your Explanation of Benefits (**EOB**) from insurance carrier is sufficient. You can obtain these online if you are registered with the carrier.

How to Submit a Claim

- When you use the Beniversal card you will receive an e-mail or letter asking to submit your receipt.
- To resolve receipt requests:
 - Through BRiWeb (*Options to upload receipts, submit a substitute claim or repay an expense*)
 - Through BRiMobile (*Wait for a request or submit receipts in real-time*)
 - By mail or fax
- When the Beniversal Card is not used or for Dependent Care expenses, you will pay for an eligible expense with another form of payment (e.g. cash, check).
- Submit a reimbursement claim.
 - Use online claim submission tool
 - Use BRiMobile app for iPhone, iPad, or Android devices
 - Mail/fax claim forms with appropriate documentation to BRI
- Receive your reimbursement by direct deposit or check.



Transitions Year Claims

IMPORTANT!

- If you are currently enrolled in the FSA plan and you submit any claims with service dates before January 1, 2019, you must submit them to TASC.
- **Date of service is key** - not when you paid for it.
- You have until March 31st, 2019 to submit any prior year claims to TASC.
- After March 31st, if you have a balance that is \$500 or less, you can carry it over to 2019 – **BUT you must submit all claims to BRI after March 31st.**
- For claims incurred on or after January 1, 2019 use your new Beniversal card OR submit an online claim to BRI OR submit a paper claim to BRI.

For Paper Claims

ATTN: Claims Department
Benefit Resource, Inc.
245 Kenneth Drive
Rochester NY 14623-4277

For Online Claims

Register at
<https://www.benefitresource.com/>

Online Participant Resources

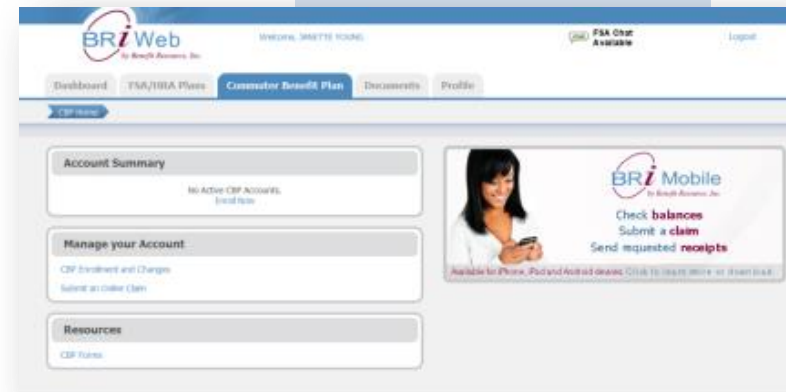


■ BRiWeb Participant Login

- Review account balance(s) and transaction detail
- Submit claims
- Resolve receipt requests
- Set up direct deposit
- Update email address
- Download resources and forms
- Search list of eligible expenses

■ Go online at www.BenefitResource.com

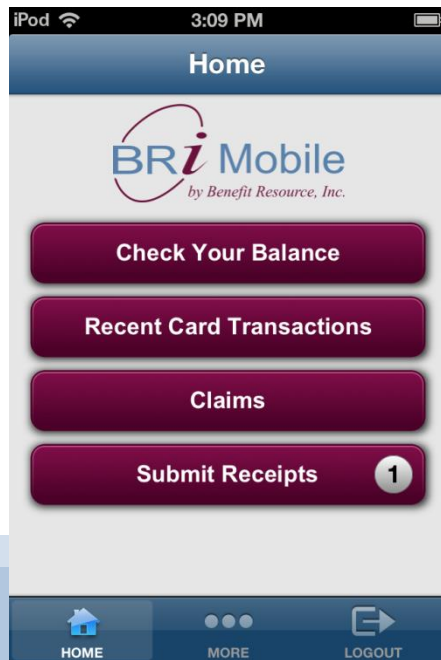
- Click on **Participants** under the **Secure Login**
- Enter the following information:
 - **COMPANY CODE: NVRPA**
 - **MEMBER ID: SSN or unique 9-digit ID#**
 - **Personal Information for Registration:**
 - First name, last name, date of birth, zip code, etc.



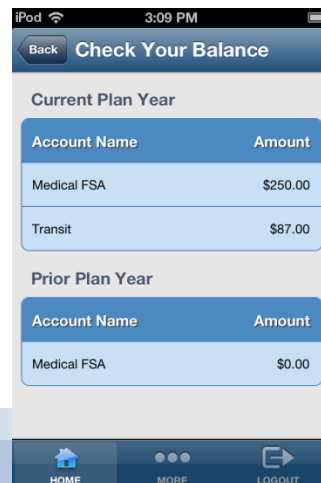
Account access on-the-go

■ BRiMobile

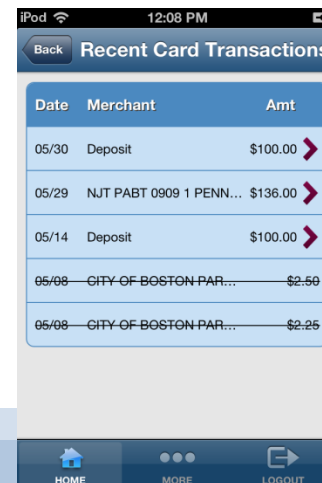
Download the BRiMobile app for Apple and Android devices.



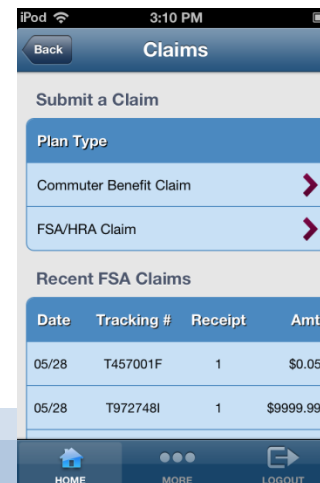
Check Balance



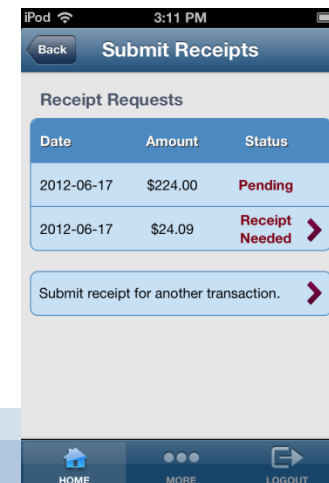
Recent Transactions



Submit Claim



Submit Receipt



Convenient Participant Support



Phone: (800) 473-9595

Monday - Friday, 8am - 8pm (Eastern Time)

Bilingual representatives (English and Spanish)



Email: participantservices@BenefitResource.com



Online Live Chat:
www.BenefitResource.com

Monday - Friday, 8am - 5pm (Eastern Time)

(available through participant login)



Enjoy Using Your Beniversal® FSA Account!

