

Health care flexible spending account

Under your plan, the maximum and minimum you can elect for the health care FSA is:

Maximum : \$3,050

Minimum : \$520



- When calculating your election amount, remember to include expenses for yourself, your spouse and/or your tax dependents
- Expenses submitted to the Health Advantage FSA *cannot* be reimbursed by an additional source, such as from your or your spouse's employer-sponsored health and/or dental plan
- These expenses also *cannot* be deducted on your or your spouse's tax return

Dependent care flexible spending account

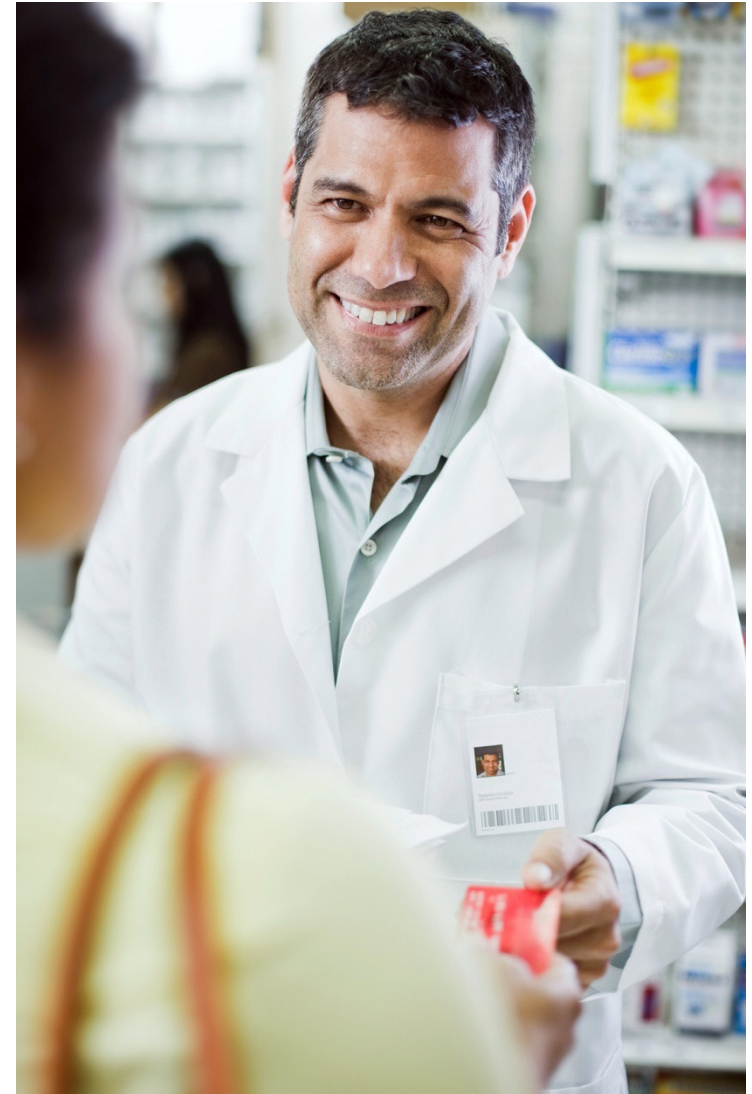
Requirements:

- Care must be for one or more qualifying individuals
- A qualified individual must be a dependent claimed on your taxes
- Expenses must be for you and spouse to work, look for work or go to school full-time
- Minimum election is \$520 and the maximum annual election is \$5,000 per household per tax year



Added convenience: Optum MasterCard® payment card

- Your Optum payment card can be used at eligible merchants and medical providers where you incur FSA-eligible expenses.
- You can use the payment card instead of your own cash or credit card to pay for any eligible expenses.
- Keep your receipts! The IRS requires it. Optum might also require additional substantiation to determine eligibility.
- If you go to a merchant that uses the Inventory Information Approval System (IIAS), you usually will not be asked to submit documentation for those items you purchased using your payment card; however, you should always save your receipts.
- The card will be mailed to your home in a plain white envelope from Benefit Payment System.



How to submit claims

There are **two** methods of submission available for your claim form and documentation:

Online

- Visit our website: optumbank.com
- Login to your account. Go to “File a Claim”.

Paper

* Print and fill out the “FSA Reimbursement Request Form” located in the “Tools & Support” section.

Regardless of your submission method, you will want to make sure you submit legible documentation. If we are unable to read items because of the quality of the copy, the claim will be denied pending resubmission of legible documentation.

Supporting documentation must clearly identify:

1. Name of provider or clinic providing the eligible service
2. Description of service
3. Date expense was incurred
4. Total expense amount
5. Signature and date (of claim submission)

Canceled checks and credit card statements are not valid receipts.

Receiving your reimbursement

- You decide if you want your reimbursement direct-deposited into your bank account or if you want to receive a check in the mail.
- An EOB statement will be mailed to your home with the check or deposit confirmation.
- Your plan allows you to submit claims for the previous plan year through September 30th of the following year. All expenses need to be incurred by 12/31/2023 for Health Care FSA, or 3/15/2024 for Dependent Care FSA.



Health Advantage FSA reminders

Health care plan: Minimum: \$520 | Maximum: \$3,050

Dependent care: Minimum: \$520 | Maximum: \$5,000

Plan year: 1/1/23 through 12/31/2023

Grace period: 2 months and 15 days from the end of the plan year to incur expenses in your Dependent Care FSA

Previous claims: Your plan allows you to submit claims for the previous plan year through September 30th of the following year

Election: Irrevocable for the plan year unless you have an eligible status change event

The date of service: Date the service is received not necessarily when it's paid for