Flexible Spending Accounts (FSAs)

What does the Beniversal FSA provide?

- Tax-free money for medical and dependent care expenses
- Convenient access to account funds through the Beniversal® Prepaid Mastercard®
- On-the-go account access with the BRiMobile app
- Streamlined online account support through BRiWeb
- Friendly and knowledgable participant services representatives to assist with your questions

Visit www.BenefitResource.com



What is a Flexible Spending Account?

A Flexible Spending Account (FSA) is an IRS-approved account that allows you to pay for eligible medical and dependent care expenses on a tax-free basis.

How does the tax savings work? When you enroll in your employer sponsored Flexible Spending Account, your contributions are not subject to Federal, FICA and most state taxes. This means you bring home more money in your paycheck!



Tax Savings Example

Annual Income	\$50,000
Anticipated Medical Expenses	\$2,500

	Without Plan	With Plan
Federal Income Tax Paid	\$12,500	\$11,875
State Income Tax Paid	\$3,000	\$2,850
FICA	\$3,825	\$3,634
Total Taxes Paid	\$19,325	\$18,359
Disposable Income	\$30,675	\$31,640
Annual Tax Savings		\$966

The figures above are for illustration purposes only. Actual savings and tax rates may vary.

Calculate your personalized tax savings at www.BenefitResource.com.

Who can participate? In order to participate in the plan, you need to meet the eligibility requirements set by your employer. If you or your spouse is reporting contributions to an HSA, generally you will not be eligible to participate in a Medical FSA. Please contact your employer or refer to your plan documentation for more details and eligibility requirements.

How do elections work? Prior to the start of a plan year or when you become eligible, you will make an annual election for medical and/or dependent care expenses separately (as applicable). Elections do not carry over from year to year. Check with your employer about the maximum (and any applicable minimum) amounts you can set aside in a Medical FSA and Dependent Care FSA. Generally, once you have enrolled in the plan, you cannot change your elections during that plan year unless you have a certain qualifying event (e.g. marriage, death, change in employment status, etc.) that may allow a change in your plan year election amounts. More information is also available in your plan documentation.

When can I access FSA funds? Services must be provided during the plan year designated in your plan documentation and you cannot access FSA funds until the service is provided. The IRS allows one exception for orthodontia expenses. Refer to your plan documentation regarding any unused funds at the end of the plan year.

What are eligible medical expenses?

This list is intended to be used as a quick reference of potentially eligible medical expenses and does not guarantee that an expense will be eligible. Please see your plan documents to verify what expenses are reimbursable under your plan. This list is not intended to be an all encompassing list and may be updated from time to time. Eligible expenses for Flexible Spending Accounts (FSAs) are governed by Section 213(d) of the Internal Revenue Code. In addition to the list below, there are over 150 additional items or expense types that are considered potentially eligible. These may require prescriptions or a letter of medical necessity when submitting a reimbursement request.

Acupuncture

Alcoholism treatment

Allergy treatments (if prescribed)

Ambulance

Arthritis gloves

Artificial limbs

Artificial teeth

Asthma devices and medicines

(if prescribed)

Bandages

Body scans

Braille books and magazines

Breast pumps

Breast reconstruction surgery

following mastectomy

Cancer screenings

Carpal tunnel wrist supports

Chiropractors

Circumcision
Co-insurance amounts

Co-payments

Counseling, when used to treat

diagnosed medical condition

CPAP (continuous positive airway

pressure) devices

Crutches

Dental sealants

Dental services and procedures Dentures and denture adhesives

Diabetic supplies

Diagnostic items/services

Drug addiction treatment

Drug overdose, treatment of Durable medical equipment

Eye examinations, eyeglasses,

equipment, and materials

First aid kits

Flu shots

Fluoridation services

Gauze pads

Guide dog

Hearing aids

Hospital services

Immunizations

Insulin

Laboratory fees

Lactation consultant

Laser eye surgery, Lasik

Liquid adhesive for small cuts

Lodging at a hospital or similar

institution

Mastectomy-related special bras Medical alert bracelet or necklace

Medical alert bracelet or necklace Medical information plan charges Medical monitoring and testing devices (e.g. blood-sugar test kits

and test strips)

Medical practitioner's fee for online or

telephone consultation

Medical records charges

Midwife

Norplant insertion or removal

Obstetrical expenses

Occlusal guards to prevent teeth

grinding

Operations / Surgeries

Optometrist

Organ donors

Orthodontia

Orthopedic shoe inserts

Osteopath fees

Ovulation monitor

Oxygen

Physical exams

Physical therapy

Pregnancy test kits

Prescription drugs and medicines,

for the purpose of medical care (not general health or cosmetic

purposes)

Preventive care screenings

Prosthesis

Psychiatric care

Radial keratotomy

Reading glasses

Rehydration solution

Rubbing alcohol

Screening tests

Sleep-deprivation treatment

Speech therapy

Stop-smoking programs

Telephone equipment or television for

hearing-impaired persons

Thermometers

Transplants

Transportation expenses for person to receive medical care, may

include car mileage or alternative

transportation costs

Vaccines

Vision correction procedures

Walkers Wheelchair

X-ray fees

Eligible Over-the-Counter Medical Supplies

Adult incontinence products (e.g. Depends)

Birth control products (e.g. prophylactics) (if allowed by your plan)

Contact lens solution

Denture adhesives

First aid supplies (e.g. band-aids)

Health monitors (e.g. blood pressure, cholesterol, HIV,

thermometers) Hearing aid batteries

Heat wraps (e.g. ThermaCare)

Heating pads, hot water bottles

Insulin & diabetic supplies

Medicine dropper/spoon Motion sickness devices

Supports/braces (e.g. ankle, knee, wrist, therapeutic glove)

Eliqible Over-the-Counter Drugs & Medicines

(require a prescription)

Acne medications

Allergy and sinus medications

(e.g. Benadryl, Claritin, Sudafed)

(e.g. Benadryi, Clarit Anti-fungal medications

(e.g. Lotramin AF)

Anti-itch medications (e.g. Caladryl)

Cold sore medications

Cough, cold & flu remedies

Decongestants

Diaper rash ointments

Ear wax removal drops

First aid creams Gastrointestinal aids (e.g. antacids,

anti-diarrhea medicines, non-fiber laxatives, nausea medications)

Lactose intolerance pills

Motion sickness pills

Nasal sprays for congestion

(e.g. Afrin) Pain relievers (e.g. aspirin, Excedrin,

Tylenol, Advil, Motrin)

Sleeping aids Smoking cessation medications

(e.g. nicotine gum or patches)

Suppositories Toothache relievers (e.g. Orajel)

Wart remover medications Yeast infection creams (e.g. Monistat)

Once your account is open, you will have access to a detailed eligible expense look up table.

Simply log in to your account at www.BenefitResource.com and select

Eligible Health Care Expense Table under the FSA section.

FSA Expense & Tax Savings Estimate Worksheet

Medical FSA Estimate: Estimate your eligible out-of-pocket medical expenses. Out-of-pocket expenses include services for you, your spouse and eligible dependents.

Genera	I Expenses	Dental	
\$ \$ \$	Office visits / doctor's fees (actual cost if deductible applies or total co-payments) Immunizations / Vaccines Laboratory fees / X-rays Over-the-counter drugs and medicines (prescription required)	\$ Cleanings / Dental Exams \$ Fillings / Dental procedures \$ Orthodontia \$ X-rays \$ SUBTOTAL	
\$ \$ \$	Over-the-counter medical supplies Prescription Drugs SUBTOTAL	Vision \$ Corrective eye surgery & eye w \$ Eye exams	vear
Hospita	Ilization & Specialist Expenses Emergency Room	\$ Prescription glasses / contact le	enses
\$ \$	Hospital Bills Specialists or alternative medicine (Acupuncture, chiropractor, physical therapy, specialists fees, etc.)	Hearing \$ Hearing Aids \$ Hearing Exams	
\$ \$ \$	Surgery OTHER MEDICAL EXPENSES NOT SPECIFIED SUBTOTAL	\$ SUBTOTAL \$ TOTAL MEDICAL FSA ESTIMA	ΑΤΕ

Dental	
\$	Cleanings / Dental Exams
\$	Fillings / Dental procedures
\$	Orthodontia
\$	X-rays
\$	SUBTOTAL
Vision	
\$	Corrective eye surgery & eye wear
\$	Eye exams
\$	Prescription glasses / contact lenses
\$	SUBTOTAL
Hearing	
\$	Hearing Aids
\$	Hearing Exams
\$	SUBTOTAL

Dependent Care FSA Estimate: Estimate your eligible out-of-pocket dependent care expenses.

			<u> </u>	<u>'</u>	
Dependent Car	e Expenses				
\$	Adult Day Care				
\$	Child Day Care /	In-home [Dependent Ca	re	
\$	Nursery School				
\$	TOTAL DEPEND	ENT CAR	E FSA ESTIM	IATE	

	Amounts
. ENTER TOTAL MEDICAL FSA ESTIMATE (See Plan Highlights for the maximum limits that may apply.)	\$
. ENTER TOTAL DEPENDENT CARE FSA ESTIMATE (See Plan Highlights for the maximum limits that may apply.)	\$
. TOTAL EXPENSES (Line A + Line B)	\$
. TAX RATE (Enter percentage of your gross salary that you pay in Federal, State and Local Taxes. (If uncertain, use 30%.))	0
. FICA (includes Social Security and Medicare)	
TOTAL TAX RATE (Line D + Line E)	

What do I need to know about FSAs?

Medical FSA

A Medical FSA can be used to pay for eligible medical expenses provided to you, your spouse or eligible dependents.

- Upon enrolling in a Medical FSA, you have access to your full plan year election amount.
- The tax-free amount you can set aside in a Medical FSA per plan year can be found in your Plan Highlights. Your Plan Highlights also contain other specific information about your employer sponsored plan.
- Expenses must be primarily to prevent, treat, diagnose or mitigate a physical or mental defect or illness. The eligibility of an expense is governed by the IRS. Common eligible expenses include:
 - Co-payments, co-insurance and deductible expenses
 - Dental care (e.g. exams, fillings, crowns)
 - Vision care, eyeglasses, contact lenses
 - Chiropractic care
 - Prescription drugs and certain over-the-counter medical items
- Expenses cannot be for personal care, cosmetic or general health purposes.
- Some expenses are only eligible if certified by a licensed medical provider as medically necessary.
- Expenses cannot be reimbursed from any other source (e.g. insurance).
- Refer to your Plan Highlights for details regarding how unused Medical FSA funds are treated.
- While you can use the Medical FSA for medical expenses for a spouse or dependent, you cannot use Medical FSA funds for dependent care expenses (e.g. child care) and vice-versa.

Dependent Care FSA

A Dependent Care FSA can be used to reimburse dependent care expenses (e.g. child care) for a qualified person. These expenses enable you to be gainfully employed and, if married, enable your spouse to be gainfully employed, look for work or attend school full-time.

- The qualified person must spend at least 8 hours per day in your home and is one of the following:
 - Dependent child under the age of 13 and for whom you can claim a tax exemption.
 - Spouse or dependent who is physically or mentally incapable of self-care, lives with you for more than half of the year, and for whom you can claim a tax exemption.
- The tax-free amount you can set aside per calendar year in a Dependent Care FSA can be found in your Plan Highlights.
- Common eligible expenses, include:
 - Before/after school care
 - Child Care / in-home dependent care
 - Day care facility
 - Nursery school
 - Adult care
- Services provided for education, overnight camps or services provided by the child's parent or other dependent for income tax purposes are not eligible expenses.
- The amount available for reimbursement of dependent care expenses is limited to the cash balance in your Dependent Care FSA.
- Refer to your Plan Highlights for details regarding how unused Dependent Care FSA funds are treated.
- You cannot claim a federal tax credit for any expenses reimbursed through a Dependent Care FSA. Consult a tax professional to determine if it would be more to your advantage to elect a Dependent Care FSA or to use the federal tax credit.

Use the FSA Expense & Tax Savings Estimate Worksheet included in the booklet to help you estimate how much you should elect.

How do I access my FSA?

Use the Beniversal Card (if offered)

The Beniversal Prepaid Mastercard can be used at qualified merchants providing medical products and services, such as: doctors, dentists, medical labs, hospitals, medical supply stores, vision centers and certain drugstores and retail merchants. (A list of drugstores and retail merchants is available at www.BenefitResource.com).



When using your card, always save your itemized receipts. With an FSA, the IRS requires Benefit Resource to verify that 100% of transactions are for eligible expenses. Since some qualified merchants also offer services/items that are not eligible, Benefit Resource may contact you requesting additional documentation on a transaction.

Requested receipts and documentation for card transactions can be submitted online at www.BenefitResource.com, through the BRiMobile app or by fax/mail. Instructions will be provided in the request.

Submit a Claim

When not using the Beniversal Card or for Dependent Care expenses, you can submit a claim with your itemized receipt or supporting documentation. Claims can be submitted:

- Online at www.BenefitResource.com
 Once logged in to your account, go to the FSA/HRA tab and select Submit Online Claim. Follow the on screen instructions.
- Through the BRiMobile app Download the BRiMobile app from the Apple App Store or Google Play.
- By faxing/mailing a claim form
 Claim forms can be downloaded and printed from www.BenefitResource.com.

Reimbursements are paid weekly. To receive your reimbursements by direct deposit, please log into www.BenefitResource.com and set up your direct deposit account information.



The Beniversal Prepaid Mastercard is issued by The Bancorp Bank pursuant to license by Mastercard International Incorporated. Mastercard is a registered trademark of Mastercard International Incorporated. Card accepted at qualified merchants accepting Debit Mastercard. The Bancorp Bank; Member FDIC. ©2017 Benefit Resource, Inc. All rights reserved.

Log in to BRiWeb

BRiWeb is your secure participant login for managing your accounts with Benefit Resource. BRiWeb allows you to view balance and transaction information, submit claims, download plan documents and much more.

To log in, go to www.BenefitResource.com:

- 1. Click Participants under Login.
- 2. On the Participant Login page, if you have not already set a personalized Login ID, you will need the following:

Company Code: Provided by your employer

Member ID: Default Login ID selected and provided by your employer

3. Once logged in, BRiWeb will open to a Dashboard which provides a quick snapshot of your account(s). To manage your FSA, navigate to the FSA/HRA section.

To view a quick video demo of BRiWeb, visit BRI Resources at www.BenefitResource.com.

Download the BRiMobile app

BRiMobile is your on-the-go account access to view balances and recent transactions, submit claims, send receipts or sign-up for account alerts. BRiMobile app is available for iPhone, iPad and Android devices. Learn more at www.BenefitResource.com/tools or download the app from the Apple App Store or Google Play.



BRI Web

Participant Login



Contact Participant Services

Participant Services is available to assist with your questions by phone, chat and email. Representatives are available in English and Spanish.

Phone: (800) 473-9595, Monday - Friday, 8am - 8pm (Eastern Time)

Email: ParticipantServices@BenefitResource.com

Live Chat: Available through the participant login at www.BenefitResource.com

For more information on these or other account information, please visit us at www.BenefitResource.com.

Getting Started

1. Determine your election amount(s) for Medical FSA and Dependent Care FSA separately.

Utilize the FSA Expense & Tax Savings Estimate Worksheet in this booklet or visit www.BenefitResource.com to access the online calculators.

TIPS: Be a little conservative in your estimates. Check your Plan Highlights to see what happens to funds that you do not use by the end of the plan year. Also, be sure to check with your employer or review your Plan Highlights for any minimum or maximum limits that may apply, along with any restrictions on eligible expenses.

2. Enroll in the FSA

Your employer will provide you detailed instructions regarding how and when enrollment will need to be completed.

If online enrollment is offered by your employer, go to www.BenefitResource.com, click on Participants under Secure Login.

1. On the Participant Login page, if you have not already set a personalized Login ID, you will need the following:

Company Code: Provided by your employer

Member ID: Default Login ID selected and provided by your employer

2. Once logged in, navigate to the enrollment area.

3. Begin using your account.

If you have enrolled in a Medical FSA for the first time and the Beniversal Card is offered, it will arrive in a plain white envelope from Benefit Resource. Once you receive your card, you will need to activate it by calling the number on the activation sticker. If you already have a Beniversal Card, you can continue to use the card through the expiration date. If you are not using a card or have dependent care expenses, you can begin submitting claims for reimbursement.

Please check with your employer or refer to your Plan Highlights regarding any restrictions that may exist regarding eligible expenses and time frames for using funds and reimbursing eligible expenses.

Questions?

Visit us online at: www.BenefitResource.com

What do participants think of their Beniversal FSA?

"Everyone is very helpful and responsive. I've used the Live Chat a few times- I love it!!!!"

"The BRI staff have always been very helpful, courteous, and knowledgeable; and your website is very user-friendly. Keep it up!"

"I'm always pleased when I don't need to contact an organization for help or to sort out problems because it means the business is doing a lot of things right to avoid trouble in the first place."

"I recommend daily that my co-workers get this card!"





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