WHY JOIN FLEX?
SAVE MONEY!

A Flexible Spending Account (FSA) offers you an easy way to reduce your taxes. When you participate in an FSA, you are only taxed on the income left over after you have paid certain out-of-pocket healthcare and daycare expenses. An FSA provides you valuable benefits and tax savings since many of your normal expenses can be paid with pre-tax money!

THE TAX SAVINGS ARE SIGNIFICANT

Money withheld for the FSA escapes Federal and State income taxes and Social Security Tax. By adding these three tax brackets together, you will find that your tax savings can be as great as 40% of the amount contributed to the FSA.

Joining the plan is simple

FLEX ISN’T JUST FOR YOU, IT’S FOR THE WHOLE FAMILY!

You can include expenses for you, your spouse, your qualified tax dependents as well as your adult children (through December 31st of the year in which he or she turns 26). Their expenses are eligible for the FSA even if they aren’t enrolled in your employer’s health coverage.

COMMON ELIGIBLE MEDICAL EXPENSES INCLUDE:

- Insurance: co-pays, deductibles, co-insurance
- Medical: medical doctor fees, office visit charges, annual physical exams, x-rays, lab fees
- Vision: vision exams, frames and lenses, including prescription sunglasses, contact lenses, LASIK eye surgery
- Medicines and drugs: Prescription and Over-The-Counter (see below)
- Dental: exams, x-rays, fillings, false teeth, retainers, caps, crowns, orthodontia, implants
- Chiropractors / Acupuncturists

COMMON ELIGIBLE OVER-THE-COUNTER (OTC) MEDICAL SUPPLIES:

- Contact lens solution
- Insulin & diabetic supplies
- Band-aids/bandages
- Reading glasses
- Birth control products and pregnancy tests
- Supports/braces (e.g. ankle, knee, wrist, therapeutic gloves)

Enrolling in an FSA Can Save You Money

<table>
<thead>
<tr>
<th></th>
<th>FSA</th>
<th>NO FSA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Income</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Pretax FSA Contribution</td>
<td>($6,000)</td>
<td>$0</td>
</tr>
<tr>
<td>Taxable Income</td>
<td>$44,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Estimated Taxes</td>
<td>$11,880</td>
<td>$13,500</td>
</tr>
<tr>
<td>Available Income</td>
<td>$38,120</td>
<td>$36,500</td>
</tr>
<tr>
<td><strong>ESTIMATED SAVINGS</strong></td>
<td><strong>$1,620</strong></td>
<td></td>
</tr>
</tbody>
</table>

Actual savings will depend on your salary, how much you contribute into the FSA, your tax bracket, and how you file your taxes (single, married, etc.).

“I SAVED OVER $1,500!”
COMMON ELIGIBLE OVER-THE-COUNTER (OTC) DRUGS AND MEDICINES REQUIRING A PRESCRIPTION:

- Cold, Flu, Allergy and Sinus Medications (throat lozenges)
- Pain Relievers (Aspirin, Excedrin, Tylenol, Advil, Motrin)
- Acne medications
- Acid controllers
- Anti-gas products
- Sleep aids & sedatives

ITEMS THAT DO NOT QUALIFY FOR REIMBURSEMENT UNDER AN FSA/HSA PLAN:

- Elective cosmetic surgery
- Teeth whitening products
- Kindergarten tuition expenses
- Resident/overnight camps
- Mouthwash, toothpaste/brushes & floss
- Hair re-growth

DEPENDENT CARE:

A Dependent Care Account helps you save money on daycare expenses for dependent children and adults so you can work. Qualifying dependents include children under the age of 13, whom you claim as a dependent on your federal income tax return (special rules apply for divorced parents), a disabled spouse, and any other dependent on your tax return who resides with you and is physically or mentally disabled. Be sure to budget for Health Care Account & Dependent Care Account expenses separately. Elections to, and reimbursement from, these accounts cannot be blended. Also the “use it or lose it” provision applies. Expenses must be incurred during the period of time you are a participant in the Dependent Care Plan, and any amounts remaining in your accounts at the end of the plan year will be forfeited.

COMMON ELIGIBLE DEPENDENT CARE EXPENSES:

The following dependent care expenses are eligible when you and your spouse, if applicable, are working.

- Pre-school expenses for dependent child
- Daycare for a child under the age of 13
- Before and after school expenses for a dependent child

INELIGIBLE EXPENSES:

- Kindergarten tuition
- Overnight camp
- Care for dependents 13 or older (who are NOT physically or mentally disabled)

A COMPREHENSIVE LIST OF ELIGIBLE AND NON-ELIGIBLE FSA/HSA EXPENSES CAN BE FOUND AT: http://www.24hourflex.com/fsaexpenses

Shop online for FSA Eligible Items www.fsastore.com (use code 24enroll1 for $5 off purchase of $50 or more)
ENROLLING IS EASY!

1. You must be eligible for the plan
2. Decide which Spending Account(s) you want to participate in - the Medical FSA and/or the Dependent Care FSA
3. Complete your employer’s Benefit Enrollment Form or online enrollment

Expenses must be incurred inside the plan year. Use it or lose it: The key is to estimate your expenses carefully. According to the IRS regulations, any unused funds that remain in your account at the end of the Plan year will be forfeited.

WHEN CAN I ENROLL?
You may enroll in the FSA...
- During your employer’s annual open enrollment. You must enroll no later than the last day of the open enrollment.
- When you become eligible for benefits.
- During the plan year if you or an eligible family member has a qualifying change in status (birth, marriage, divorce, etc.) that creates a special open enrollment.

GETTING PAID IS EASY

HOW DO I ACCESS MY FUNDS?
The 24HourFlex Debit Card provides a convenient way to pay for eligible out-of-pocket medical expenses for you and your family. The IRS has regulations regarding where the card can be used and when follow-up documentation is required.

BENEFITS OF THE 24HOURFLEX CARD
- Immediate access to the funds in your FSA plan.
- The 24HourFlex Card allows you to pay your co-payments and deductibles using the Card. Co-payments will auto-approve, meaning no further receipts will be required.

DIRECT DEPOSIT
Sign up for direct deposit at www.24HourFlex.com and receive reimbursements directly to your bank account.

ESTIMATE YOUR EXPENSES

PLANNING WORKSHEET

This worksheet will help you determine how much your medical and dependent expenses may be during the upcoming plan year.

MEDICAL, DENTAL & VISION EXPENSES NOT COVERED BY INSURANCE

<table>
<thead>
<tr>
<th>Expense</th>
<th>Annual Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$</td>
</tr>
<tr>
<td>Co-pays</td>
<td></td>
</tr>
<tr>
<td>Prescription Drugs</td>
<td></td>
</tr>
<tr>
<td>OTC Medicines*</td>
<td></td>
</tr>
<tr>
<td>Chiropractic Treatments</td>
<td></td>
</tr>
<tr>
<td>Medical Equipment (crutches, oxygen, etc)</td>
<td></td>
</tr>
<tr>
<td>Dental Checkups/Cleanings</td>
<td></td>
</tr>
<tr>
<td>Annual Deductible</td>
<td></td>
</tr>
<tr>
<td>X-rays, Fillings, Root Canals</td>
<td></td>
</tr>
<tr>
<td>Crowns</td>
<td></td>
</tr>
<tr>
<td>Implants</td>
<td></td>
</tr>
<tr>
<td>Dentures</td>
<td></td>
</tr>
<tr>
<td>Exams</td>
<td></td>
</tr>
<tr>
<td>Eyeglasses and/or Reading Glasses</td>
<td></td>
</tr>
<tr>
<td>Contact Lenses</td>
<td></td>
</tr>
<tr>
<td>Contact Lens Solution</td>
<td></td>
</tr>
<tr>
<td>Corrective Eye Surgery (LASIK, PRK, cataract)</td>
<td></td>
</tr>
<tr>
<td>Hearing Exams, Hearing Aids</td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL MEDICAL CARE EXPENSES: $ 

DEPENDENT CARE EXPENSES $ 

TOTAL MEDICAL AND DEPENDENT CARE EXPENSES: $ 

*Most OTC medicines or drugs are ineligible unless prescribed.

Read your Summary Plan Description (SPD) carefully to understand the specific terms of your Plan. The Plan Document governs your rights and benefits under each Plan and is available through your employer.
SAVING RECEIPTS IS IMPORTANT

HOW DO I SUBMIT MY RECEIPTS TO 24HOURFLEX?
Once a month, 24HourFlex will mail to you a report showing any debit card charges that require receipts. Simply follow the instructions on the report. Do not use a blank 24HourFlex claim form to submit receipt requests.

Credit card authorization is not a valid receipt.

Acceptable receipts must include:
- Date of service
- Service performed
- Vendor providing the service
- Amount

To receive the fastest reimbursement for an eligible out-of-pocket expense, submit your claims online. Supporting receipts and documentation can be scanned and attached to your online claim, or you can email, fax or mail the required paperwork.

Another option is to download a paper Reimbursement Request form. Complete the form by itemizing your expenses and following the important and detailed instructions found directly on the form. Reimbursement Request forms and required documentation can either be mailed or faxed for processing.

NO RECEIPTS REQUIRED
When you use your card to purchase FSA-eligible items at a merchant with an IRS compliant inventory approval system, no receipts will be required to be submitted. Thousands of merchants have installed this inventory approval system and more merchants are being added all the time. Please check our website www.24HourFlex.com for the latest list.

The 24HourFlex Card provides secure, 24-hour access to your flex account through our website, www.24HourFlex.com

DO I STILL NEED TO KEEP AND SUBMIT MY RECEIPTS?
Yes, you will need to submit copies of your receipts to 24HourFlex unless the charge equals the exact amount of one of your healthcare providers’ co-payment amounts, is a pre-approved repetitive expense, or the merchant has an IRS-compliant inventory approval system in place. 24HourFlex will notify you in writing when a receipt is required to be submitted. It is a good idea to retain all your receipts!

DO I CHOOSE DEBIT OR CREDIT AT THE CREDIT CARD TERMINAL WHEN I USE MY CARD?
Choose “credit,” there is no PIN number associated with the card.

WHAT IF THE DOCTOR’S OFFICE, OR SOME OTHER PROVIDER, DOESN’T TAKE CREDIT CARDS?
In this instance, you will pay the provider with cash or a check and then submit a Claim Form to 24HourFlex for reimbursement. Claim Forms can be found online at www.24HourFlex.com. Specific instructions on submitting your claim(s) are also provided.

DOESN’T 24HOURFLEX ALREADY KNOW WHAT I PURCHASED ON THE 24HOURFLEX CARD?
No. 24HourFlex knows only the date, amount, and place of the transaction. A description of the purchased item is not captured by the card vendor or 24HourFlex, and is not given to 24HourFlex.

CAN I CHANGE MY FLEXIBLE SPENDING ACCOUNT ELECTION MID-YEAR?
In general, once the plan year has started an election may not be changed unless there is a status change event. Status change events as defined by the IRS include:
- Change in legal marital status
- Judgments, decree or court order
- Entitlement to or loss of Medicare or Medicaid
- Dependent satisfies or ceases to satisfy eligibility requirements
- Special requirements related to Family Medical Leave Act (FMLA)
- Entitlement to COBRA
- Change in employment status that affects eligibility for coverage
- HIPAA Special Enrollment Rights
- Change in residence that affects eligibility for coverage

There are special rules for making mid-year election changes for Dependent Care FSA accounts.

1-800 CONTACTS
Albertsons – SuperValu
COSTCO
CVS
King Soopers/City Market
Kroger
Safeway

Sam’s Club
Target
Walgreens
Wal-Mart
VisionDirect.com
Vons

www.24HourFlex.com
WEB ACCESS

Once you have received in the mail your 24HourFlex Debit card, take the following steps to access your 24HourFlex Flex account online.

**STEP 1:** Log on to www.24HourFlex.com

**STEP 2:** Click on FSA Login

**STEP 3:** Click on New User
   (Be sure to have your pop-up blocker turned off)

**STEP 4:** Input your required information

To have your password reset, contact 24HourFlex Help Center at 800-651-4855

---

**VIEW YOUR ACCOUNT ONLINE 24/7 VIA 24HOURFLEX.COM**

**WHILE ONLINE, YOU CAN:**
- Submit claims for reimbursement
- View claims history and card activity
- Check available balance and run reports
- Order additional cards for free
- Sign up for direct deposit
- View eligible and non-eligible expenses
- Calculate estimated annual FSA tax savings
WHO IS 24HOURFLEX?
BUILDING GREAT RELATIONSHIPS THROUGH GREAT SERVICE

“I want to take a moment to express my sincere thanks to the 24HourFlex customer support/relations team for providing some serious blue ribbon customer support! Your staff has demonstrated that they are professional, involved, sharp, caring and refreshingly pro-active and helpful! Thank You!!!”

24HourFlex Participant

NEED MORE INFORMATION?

WEB ACCESS FEATURES LEARNING CENTER
VISIT THE 24HOURFLEX LEARNING CENTER AT 24HOURFLEX.COM
Select a video to learn details about your Flexible Spending Account Plan.

- 24HourFlex Cafeteria Overview, Part 1 & Part 2
- 24HourFlex Dependent Care Overview
- How to Submit a Claim Online
- 24HourFlex Online Account Overview
- Why Do You Ask for Receipts?
- 24HourFlex Debit Card Explained

CUSTOMER SERVICE

VISIT:  WWW.24HOURFLEX.COM

CALL:  800-651-4855  FAX:  800-837-4817

EMAIL:  INFO@24HOURFLEX.COM

LIVE CHAT ONLINE