

Flexible Spending Account

As part of your employer's benefit plan, you have the option to enroll in a flexible spending account (FSA) to save money on out-of-pocket healthcare expenses. Participating in an FSA is an easy way to pay for everyday health needs and unexpected medical emergencies.

What is an FSA?

An FSA is a tax-advantaged spending account for healthcare expenses. When you enroll in an FSA, you will choose an amount to contribute, tax-free, to pay for thousands of eligible expenses. Whether it's \$1 or the IRS maximum of \$3,300, you will have the flexibility to choose a contribution amount that you're comfortable with and makes sense for your situation. Your total contribution will be available to you on the first day of the plan year, providing a safety net should you need that money right away.

Eligible Expenses

You will get a [debit card](#) linked to your FSA that can be used for expenses such as:

- Prescriptions
- Over-the-counter medicine
- Glasses, contacts, and LASIK
- Dental services and procedures
- Copays and deductibles
- Flu shots
- And [much more](#)

\$610 Rollover

You may have the option to roll over up to \$610 of unused FSA funds remaining at the end of the plan year. If you need ideas for spending any unused funds, head over to FSAstore.com, where everything is FSA-eligible and you can pay with your Ameriflex card.

Grace Period

This is a 2.5 month period that immediately follows the end of the plan year in which you can submit claims for reimbursement using remaining FSA funds from the previous plan year.

Account Management and Customer Support

You can manage your account online at myameriflex.com or by downloading the Ameriflex mobile app. Both provide easy access to your account balance, transaction history, status of reimbursements, order replacement cards, and more.

For account-related questions, contact the Ameriflex Participant Services team at service@myameriflex.com, Monday - Friday: 7:00 AM to 8:00 PM CST and Saturday: 9:00 AM to 1:00 PM CST.

What to Expect and How to Submit Documentation for an Expense

Due to the tax-advantaged nature of your account, the IRS has guidelines in place to ensure that purchases made with the account are for eligible medical, dental, or vision expenses. As the administrator of your account, Ameriflex has controls in place to ensure you and your employer are always in compliance with IRS regulations.

The Ameriflex Debit Mastercard® will attempt to auto-verify all transactions instantly using stored copays provided by your employer. If the transaction cannot be auto-verified at the point of purchase, this is normally because the merchant's payment terminal can't distinguish if the transaction was for an eligible or ineligible service. It's important to note that most dental and vision charges will require documentation to verify the service was not cosmetic related.

If Ameriflex cannot auto-verify your expense, you will receive a notification asking for additional documentation such as an itemized receipt, Explanation of Benefits (EOB), or a letter of medical necessity. The documentation should show: name of the person who received the service or for

whom the item was purchased, date(s) of service or purchase, the services that were rendered, name of the provider, and total cost of the expense. Please note that a standard credit card terminal receipt is not an acceptable form of documentation.

If you receive a request for additional documentation to verify an expense, complete the following steps on your desktop, tablet, or mobile device using the Ameriflex app.

1. Log into your Ameriflex account.
2. Locate the transaction that requires additional documentation.
3. Click Add Documents next to the specific transaction.
4. A new window appears.
5. Locate and select the documentation you'd like to upload. This can be a picture from your mobile device.
6. Follow the remaining window prompts on your screen to complete the uploading process.