

YOUR FLEX GUIDEBOOK



Waco Family Medicine
FSA • DCAP

HERE ARE THE HIGHLIGHTS: FSA • DCAP

FLEXIBLE SPENDING ACCOUNT (FSA)

FSA Basics:

You may elect to defer up to \$3,300 of your salary for 2025 for qualifying medical, dental and vision expenses. The amount you elect is not subject to any payroll or federal income tax and the full amount you elect is available to you on the first day of the plan year. Note: any premiums you pay for employer sponsored insurance are automatically exempt from taxation when paid via payroll deduction.

Your FSA money is only for eligible medical, dental and vision expenses for you, your spouse or dependent that are not covered by insurance. See eligible expense list on Page #6.

My PB&H FSA Debit Card:

When you enroll in FSA, PB&H will provide you with 2 debit cards to use for your out-of-pocket expenses. No additional paperwork is needed when using the debit card for co-pays, prescriptions and eligible over-the-counter medications or supplies at your pharmacy and most major grocery stores.

If you use your card for dental, vision or specialist, you will be asked to provide an itemized list of services including date of service, amount, provider and who received the service. Credit card receipts are not acceptable documentation, and certain expenses require a Note of Medical Necessity (NMN) from your provider.

If an expense is deemed ineligible, you are responsible to reimburse your account for that expense and the funds will be loaded back on your FSA debit card.

DEPENDENT CARE ASSISTANCE PROGRAM (DCAP)

DCAP Basics:

You may elect to defer up to \$5,000 of your salary for qualifying dependent and childcare expenses. This election is also exempt from payroll and federal income taxes. Unlike an FSA, your DCAP reimbursements are limited to your year-to-date contributions. To receive reimbursement, you must file a claim. Your PB&H debit card does not work for DCAP expenses.

Who are my dependents?

Your DCAP funds can be used for a dependent under age 13 whom you claim as dependent on your tax return; or a spouse or other tax dependent who is physically or mentally incapable of self-care, is claimed as a dependent on your tax return and spends at least 8 hours per day in your home.

DCAP Expenses:

DCAP expenses should be those incurred to allow for you and your spouse (if married) to be gainfully employed. Eligible dependent care expenses include payments to childcare centers, family day care providers, baby-sitter, nursery school, and caregivers for a disabled dependent.

Caregivers cannot be your child under the age of 19 or an individual that you are entitled to a personal tax exemption as a dependent. Other ineligible expenses include food or supplies, expenses for K-12, healthcare, overnight camp, or transportation.

CLAIMS AND ELECTION CHANGES: FSA

CLAIM FILING AND DEADLINES

How to file a claim:

Request or download a claim form from pbhbenefits.com under Resources/Flexible Benefit Participants. Complete the form with details on each amount to be reimbursed and attach a bill or statement showing date of service, type of service, person who received service and description of service. Once received in good order, please allow 7-10 business days for your claim to be processed.

Completed claim package can be submitted via mail, delivery, email, or fax as follows:

PB&H Benefits, LLC
 Attn: Flexible Benefits
 401 West Highway 6
 Waco, TX 76710
 Fax: (254) 772-0455
 Email: pbhbenefits.flex@pbhcupa.com

The best way to submit a claim is online through your consumer portal account.

Please refer to the online access section of this guidebook for information on managing your account online.

Deadline to incur expenses and file claims for FSA:

You may file a claim up to 60 calendar days after the end of your plan year, this is called your run-out period. The deadline for filing a claim for the current year is August 29th.

Deadline to incur expenses and file claims for DCAP:

There is no rollover of DCAP funds or grace period to incur expenses for unused funds. You have 60 days following the end of the plan year to file a claim for DCAP expenses incurred during the plan year. The deadline for filing a claim for the current year is August 29th.

Deadlines for Terminated Employees:

If you stop working for your employer, you are only allowed to be reimbursed for expenses incurred prior to your separation of employment. Separation of employment may be due to termination, retirement, disability, or death. You have until the end of the plan year plus 60 days after your last day of work to submit claims for expenses incurred prior to that date.

If your employer is subject to COBRA, you may elect COBRA if you have been reimbursed or used less than the amount you have contributed, COBRA requires you to pay in your normal payroll contribution amount plus a 2% fee at least monthly to continue to use the remaining balance of your initial election. COBRA can only extend through the end of the year that you terminate employment.

ELECTION CHANGES: FSA**Midyear Changes:**

Your election for FSA or DCAP can only be changed if you have a qualifying event (QE). QEs are marriage or divorce, death of spouse or dependent, birth or adoption of a child, Termination or change in spouse's enrollment, and leave of absence or change in status to an ineligible employee class.

Changes should follow the QE. For example, if you have a child born, you may increase your election. You have 30 days from the QE to notify your employer and a maximum of 60 days to request the change to your election.

Annual Enrollment:

Each year, you will be asked to make a new election for DCAP and FSA. You must submit a new form or complete enrollment online prior to the beginning of the year. Important note: your FSA/DCAP plan year may differ from your insurance open enrollment. If your insurance open enrollment is on a different year, you are not allowed to make changes to your FSA or DCAP at open enrollment without a qualifying event.

ELIGIBLE EXPENSES

FOR FSA

BABY/CHILD TO AGE 13

Lactation Consultant*
Lead-Based Paint Removal*
Special Formula*
Tuition: Special School/Teacher for Disability or Learning Disability*
Well Baby /Well Child Care

DENTAL

Dental X-Rays
Dentures and Bridges
Exams and Teeth Cleaning
Extractions and Fillings
Oral Surgery
Orthodontia
Periodontal Service

EYES

Eye Exam, Glasses, and Contact Lenses
Laser Eye Surgeries
Prescription Sunglasses
Radial Keratotomy

HEARING

Hearing Aids and Batteries
Hearing Exams

LAB EXAMS/TESTS

Blood Tests and Metabolism Tests
Body Scans
Cardiograms
Laboratory and X-Rays

MEDICAL EQUIPMENT/SUPPLIES

Air Purification Equipment*
Orthopedic Shoes, Arches, and Inserts
Contraceptive Devices
Crutches, Walkers, Wheelchairs
Exercise Equipment*
Hospital Beds*
Medic Alert Bracelet or Necklace
Nebulizers
Oxygen*
Prosthetics
Syringes
Wigs*

MEDICATIONS

Insulin
Prescription Drugs

OBSTETRICS

Lamaze Class
OB/GYN Exams
OB/GYN Prepaid Maternity Fees (after date of birth)
Pre- and Postnatal Treatments

PRACTITIONERS

Allergist
Chiropractor
Christian Science Practitioner*
Dermatologist
Homeopath
Optometrist
Osteopath
Physician
Psychiatrist or Psychologist

THERAPY

Alcohol and Drug Addiction
Counseling (not marital or career)
Hypnosis*
Occupational, Speech and Physical
Smoking Cessation Programs*
Weight Loss Programs*

MEDICAL PROCEDURES/SERVICES

Acupuncture
Alcohol and Drug/Substance Abuse (inpatient treatment and outpatient care)
Ambulance
Fertility Enhancement and Treatment
Hair Loss Treatment*
Hospital Services
Immunization
In Vitro Fertilization
Physical Examination (not employment-related)
Service Animals*
Sterilization/Sterilization Reversal
Transplants (including organ donor)

Continued on next page.....

ELIGIBLE OVER-THE-COUNTER ITEMS

Antiseptics, Wound Cleansers

Alcohol, peroxide, Epsom salt

Denture Adhesives, Repair, and Cleansers

PoliGrip, Benzodent, Efferdent

Diabetes Testing and Aids

Insulin, Ascencia, One Touch, Diabetic, insulin syringes; glucose products

Diagnostic Products

Thermometers, blood pressure monitors, cholesterol testing

Elastics/Athletic Treatments

ACE bandages, Futuro, elastic bandages, braces, hot/cold therapy, orthopedic supports, rib belts

Eye Care

Contact lens care and solution

First Aid Dressings and Supplies

Band Aid, 3M Nexcare, non-sport tapes

Hearing Aid/Medical Batteries

Incontinence Products

Attends, Depends, GoodNites for juvenile incontinence

Reading Glasses and Maintenance Accessories

Feminine Products and Family Planning

Pregnancy and ovulation kits

Hygiene and Menstrual

OTC Medications

Pain relievers and anti-inflammatory medications such as Advil and Tylenol; Allergy Medicines, Digestive aids, etc.

EXPENSES NOT REIMBURSABLE

This is only a partial list of expenses that are not eligible for payment in an FSA:

Cosmetic Surgery or procedures

Diaper Service

Health club memberships

Any illegal treatment

Lens replacement insurance

Monthly fees for concierge services
or cost-share medical plans

Dental Bleaching

Funeral Expenses

Solutions for care of eyeglasses

Dietary supplements

Physical therapy for general well-being

Makeup

***May require a Note of Medical Necessity from your health care provider.**

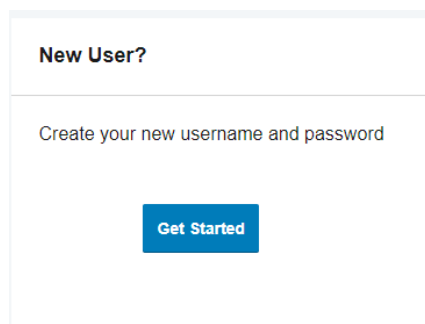
This list is not meant to be an all-inclusive list of potentially eligible FSA and HSA expenses, as other expenses not specifically mentioned may also qualify.

ONLINE ACCESS AND MOBILE APP: FSA

WEB ACCESS, ONLINE ENROLLMENT AND MOBILE APP

First-time users:

If you are enrolling online or logging in for the first time, you can access the PB&H Benefits FLEX system by going to www.pbhbenefits.com and clicking on The FLEX Experience button. You will be taken to our secure log in screen:



Click Get Started to set up your online account. Next, you will be asked to provide your first and last name, zip code and Social Security Number. The system will verify you as a user and you will be asked to complete the setup of your account. *Even if you are not completing enrollment online, you still will need to start as a New User.*

PB&H Benefits Flex mobile app:

You will be able to download FLEX Experience right on your Apple or Android device. Simply visit the App Store for iPhone users or Play Store for android users, and search "PBH Benefits".



When you see this icon, download and start managing your account. If you need help navigating the site or app, please contact your dedicated team at PB&H Benefits.

YOUR FLEX SERVICE TEAM



PB&H BENEFITS, LLC
401 West Highway 6
Waco. TX 76710

Email: pbhbenefits.flex@pbhcpa.com

Phone: (254)741-6688, Option 3

Toll Free: (888)629-2363, Option 3

Website: www.pbhbenefits.com