

Flexible Spending Account Frequently Asked Questions

Healthcare FSA and Limited Purpose FSA Questions

Am I eligible to participate in a healthcare or limited purpose FSA?

All benefit eligible employees are eligible to participate, including OPS employees.

What is a healthcare FSA?

Use this account for your eligible out-of-pocket medical, dental or vision services or products and eligible pharmacy products.

What is a limited purpose FSA?

You can use this account only for your eligible dental and vision expenses. Use a health savings account (HSA) for all other medical expenses.

How will I benefit from using an FSA?

With an FSA, you pay for eligible healthcare expenses with tax-free dollars. You won't have to pay federal or FICA taxes on the money you put into the plan. The more you use your plan, the more money you save. Your exact savings will depend on your personal tax rate.

How does the plan work?

You select the amount – up to the federal limit – that you would like to put into your healthcare account based on your needs for the coming plan year. Tax-free money from your paycheck will then be added to your account. You may use your Chard Snyder Benefit Card, or pay for eligible healthcare expenses and then submit a claim for reimbursement.

I know I will have a major medical expense in January. Will a healthcare FSA help me since I contribute all year?

Yes, the entire amount you elect to contribute to your healthcare FSA is available on January 1, so you can use your debit card or submit a claim for reimbursement, even before the state withholds your regular contribution from your paycheck. If you are a new employee, the healthcare FSA amount is available as of the date you enroll in the healthcare FSA.

How do I receive reimbursements?

You can submit a claim by using the free Chard Snyder mobile app (available through the Google Play Store or Apple's App Store); submit an online claim through the Chard Snyder online portal; or mail or fax in a paper claim form. Supporting documentation can be a receipt, a bill, an Explanation of Benefits (EOB) summary or any documentation that provides the date of service, the type of service, the service provider's name and the amount. After the claim has been reviewed and the expense approved, payment is then issued to you via direct deposit or check.

How long will it take to be reimbursed by Chard Snyder?

The claims review process generally takes between 24 and 48 hours for approval. Once a claim has been approved, you will receive reimbursement by direct deposit within 48 hours. Checks will also be mailed within 48 hours of claim approval. If a claim is not approved or additional documentation is needed, Chard Snyder will notify you.



855.824.9284
PeopleFirst.MyFlorida.com



Flexible Spending Account **Frequently Asked Questions**

Do I need to set up direct deposit with Chard Snyder for my FSA reimbursement?

If you would like to have Chard Snyder reimburse you for claims directly into your personal checking or savings account, yes. To update your banking information, log in to People First; click the *Chard Snyder* quick link; and navigate to the *Accounts* tab and choose *Banking/Cards* under the *Profile Summary* section. If you prefer to receive a check, you do not need to provide your banking information.

What is an eligible expense?

An eligible expense is any healthcare expense approved by the IRS for reimbursement through the plan. These eligible expenses are often the same expenses allowed for income tax return deductions. Expenses reimbursed through an FSA cannot be itemized and resubmitted through an income tax return and you may not use your debit card or be reimbursed for expenses that occurred before the beginning of the FSA plan year. Eligible expenses include items and services incurred by you, your spouse and any of your qualified dependents. You may not use your FSA for pre-payment of services or health insurance premiums.

Use the Eligible Expense Scanner feature in the Chard Snyder mobile app to check items for eligibility.

To access the complete and up-to-date list of eligible items online, log in to People First; click the *Chard Snyder* quick link; navigate to the Tools & Support tab; and click Eligible Expenses List.

What happens to funds at the end of the plan year?

The healthcare FSA and the limited purpose FSA have the carryover feature that allows you to carry over up to \$550 of your unused money into the next plan year. You also have until April 15, 2022 to turn in claims for reimbursement for expenses incurred by December 31, 2021.

The dependent care FSA plan has a grace period that allows you to continue to incur eligible expenses through March 15, 2022. You also have an additional 30 days (until April 15, 2022) to turn in claims for reimbursement.

How does the FSA carryover work?

If you have money left in your healthcare or limited purpose FSA at the end of 2021, up to \$550 will be automatically carried over into the new plan year. If you have any additional claims to file or receipts to submit for expenses that were incurred by December 31, 2021, you have until April 15, 2022 to turn them in. For information on what happens to the carryover if your employment ends, see the *“What happens when you leave your job or become ineligible for the benefit?”* at the end of this document.

Do I enroll each plan year?

No. The amounts that you have elected to contribute are for the duration of the plan year in which they are made. Your election amount will roll over to the next plan year provided you do not make any changes. If you have money left in your healthcare or limited FSA account at the end of the plan year, up to \$550 will carry over to the next plan year. You do not have to contribute any money in order to take advantage of the carryover feature. It does not matter how much you have decided to contribute in that next plan year.

Are there any risks to using an FSA?

Yes. If you contribute more to your account than you spend, you could lose money. The carryover feature for the healthcare and limited purpose FSA allows you to carry over up to \$550 into the next plan year, but amounts over \$500 will be forfeited.

The dependent care FSA allows you to continue spending any leftover money during the grace period (until March 15 of the next plan year), but money left after that period has ended will also be lost.

All FSAs allow you to turn in claims until the runout period is over on April 15 of the following plan year.

Flexible Spending Account **Frequently Asked Questions**

Dependent Care FSA Questions

Am I eligible to participate in a dependent care FSA?

If you are a benefits eligible state employee, you are eligible to participate.

What is a dependent care FSA?

Use this account for eligible dependent care expenses, such as daycare, that you pay to take care of a qualified dependent. You use this account for dependent care expenses only, not healthcare expenses. The money accumulates in your dependent care FSA as it is deducted from your paycheck each pay period. Your dependent care FSA reimburses you only up to the amount available in your account.

How will I benefit from using a dependent care FSA?

With a dependent care FSA, you pay for eligible dependent care expenses with tax-free dollars. You won't have to pay federal or FICA taxes on the money you put into the plan. The more you use your plan, the more money you save. Your exact savings will depend on your personal tax rate.

Which dependents are eligible?

Your natural, adopted and foster children who are 12 and under and family members who cannot physically or mentally care for themselves are eligible. All dependents must live with you for more than half the year and be claimed on your federal tax return.

The IRS defines persons as physically or mentally not able to care for themselves if they cannot dress, clean or feed themselves because of physical or mental problems. Also, persons who must have constant attention to prevent them from injuring themselves or others are considered not able to care for themselves.

If a dependent is 13 or older, Chard Snyder will ask you to provide a letter of medical necessity describing the condition from which he or she suffers.

Is there a special rule for divorced parents?

Yes. The parent the child lives with most of the time may use the dependent care plan even if the other parent claims the child as a tax dependent. If the dependent lives with both parents for the same amount of time per year, the parent with the highest adjusted gross income may use the plan.

How much may I put in the dependent care account?

Couples who are married and filing a joint return and single parents may set aside up to \$5,000 each calendar year. Married couples filing separate tax returns may each set aside up to \$2,500 each calendar year.

May I pay my teenager or spouse to watch my younger child?

No. Your dependent care provider may not be your spouse or your tax dependent under the age of 19.

How will I be repaid for my expenses?

You can submit a claim via the Chard Snyder online portal, the mobile app, or by mail, and receive a check or direct deposit payment

Flexible Spending Account Frequently Asked Questions

or you may use the Chard Snyder Benefit Card at providers who accept the card.

When should I submit my claim?

You may submit your claim at any time during your plan year. Your claim will be paid after the care has been provided. For example, if you pay on the first of the month in which care is to be provided, you may submit a claim each week, every two weeks or at the end of the month and you will be reimbursed for the care your dependent has received, or up to the balance of your account.

Is there a limit to how much I can ask for?

You may only receive the amount of money that is in your account when you submit your claim. If, for example, you submit a claim for \$200 and you have a balance of \$160, you will receive a payment of \$160. The remaining \$40 will be sent when more money is added to your account.

Chard Snyder Benefit Card Questions

Do I have to use the Benefit Card or can I submit claims and be reimbursed?

You may submit claims and be reimbursed. The card is a convenience but you are not required to use it.

If I make a purchase without the Benefit Card, how do I submit a claim for reimbursement?

You can submit claims to Chard Snyder by fax, through the mail, online or by using the Chard Snyder Mobile app. You will need a claim form to submit claims through the mail. The claim form is available on the myBenefits website and on the Chard Snyder Information Portal, accessed through the People First website.

Mobile App: Download the Chard Snyder Mobile app from your app store. Use the instructions below to log in and set up your four-digit passcode. Tap on the *File A Claim* button. Enter the claim information, upload receipts and click Submit.

Online: Log in to PeopleFirst.MyFlorida.com and click on the *Chard Snyder* quick link. Select *File A Claim*. Enter the claim information, upload receipts and click Submit.

Fax: 888.245.8452 (Please DO NOT include a fax cover page.)

Mail: Send claim form and copies of receipts to **PO Box #618, Fort Washington, PA 19034.**

May I use the Benefit Card if I receive a statement due for a medical service?

As long as the date of service is within the plan year, you have enough money in your account to cover the balance due and the provider accepts MasterCard, you can simply write the card number on the statement and send it back to the provider or call the provider and give the card number and expiration date (MM/YY) over the phone.

What happens to my Benefit Card when my employment is terminated or I resign?

Card privileges are closed when we receive notification of a termination or resignation. You may continue to submit claims by fax, through the mail, online or by using the Chard Snyder Mobile app for purchases and services that were incurred before the date of your last payroll warrant. Please contact us if you need assistance accessing your account.

Flexible Spending Account **Frequently Asked Questions**

Verifying Expenses

I was informed that there would be no paperwork needed with this card. Why did I just receive a notification asking for information?

A high percentage of transactions are automatically approved. The IRS requires you to save all your receipts in this program in case you are audited. The IRS requires Chard Snyder to verify expenses and you may be asked to submit copies of your itemized receipts to verify that your expenses comply with IRS guidelines. If the Chard Snyder Benefit Card system cannot verify that the expense meets IRS guidelines, Chard Snyder will ask you to submit copies of your itemized receipts.

Each receipt must show the merchant or provider's name, the service received or the item purchased as well as the date of the expense/service and the amount paid. Handwritten notes, credit card transaction receipts or previous balance receipts cannot be used to verify a transaction.

Why was my transaction selected for an audit?

Your transaction was not audited. When you use your Benefit Card to pay for services from a medical provider such as a hospital, clinic, doctor or dentist, you may receive notification from Chard Snyder asking you to provide paperwork to verify that your claim was for an eligible expense. For example, the IRS requires us to confirm that you went to the dentist for a check-up and not for teeth-whitening and that the date of service occurred within the time period covered by your plan.

Many vendors code over-the-counter merchandise such as bandages and prescriptions so that the Benefit Card recognizes them at the cash register. This is known as the IIAS system and these purchases do not require further approval.

Some vendors choose not to participate in the IIAS system but are certified so that you may use the card. When you use the card at certified vendors you will receive notification from Chard Snyder asking for copies of your receipts.

Can I have my provider send you the information you are requesting?

Yes. Please make sure the provider includes the cardholders name and employer so that we can match the information to your account. We also recommend that you obtain a copy of the information for your file in case you are audited by the IRS.

Why can't Chard Snyder call the provider and ask for the information that is needed?

It is your responsibility to send this information when requested. Chard Snyder cannot contact the provider on your behalf because of HIPAA regulations.

What if I lose my receipt?

Usually the service provider can provide an account history or replacement receipt. If a receipt cannot be located or recreated, you will be asked to substitute a claim or send a check or money order to the Division of State Group Insurance (DSGI) so the amount can be credited back to your account.

What if I fail to submit receipts to verify a charge?

If your claim needs to be verified, you will receive notification from Chard Snyder requesting an itemized receipt, insurance EOB's or an itemized statement from your doctor or provider.

- If we do not receive a response, your Benefit Card will be suspended.
- To reinstate your card, you must provide the required records or repay the amount in question by sending a check or money order to DSGI.
- If you fail to take one of the actions above, the state will initiate involuntary wage deductions for employees and collections proceedings for former employees.

Flexible Spending Account **Frequently Asked Questions**

What if I want to submit a Substitute Claim if an ineligible transaction has been put in repayment status?

If you have a Benefit Card transaction that has been *declined*, you are required to repay the expense back to your flexible spending account. This is when the ineligible transaction will be put into repayment status.

There are several reasons why this may happen:

- The requested documentation was received, but after review the expense is still deemed ineligible due to it being outside of the plan year or type of service is ineligible.
- The requested documentation was submitted outside of the allotted time frame.
- The necessary documentation of the ineligible expense cannot be submitted because it cannot be located by the participant.
- The participant calls Chard Snyder and informs the customer service representative that the expense is in fact ineligible or occurred outside of the plan year.

Once the ineligible expense is denied and put into repayment status you must either repay the amount in question by sending a check or money order to DSGI **OR** you may **submit a substitute claim to cover the expense**. You may submit the substitute claim and attach an Explanation of Benefits (EOB) or itemized statement for out of pocket expenses using the following methods:

- Submit an online claim.
- Submit a claim on the mobile app.
- Submit a State of Florida Claim Reimbursement Form via mail or fax. When filling out the paper claim form make sure to mark the box at the top of the claim form that indicates the claim is for substitution.

Please keep in mind, if you upload other receipts to the already denied claim, this will not automatically be considered a substitute claim. A true claim must be filed. A best practice is to contact Chard Snyder's customer service before you submit a substitute claim. You will ensure the denied claim shows repayment status before you send a substitute claim and that the claim is properly applied to the ineligible transaction.

General Questions

How do I access my account online?

Use the Chard Snyder Chard Snyder Information Portal to check your account balance or make a distribution. Here's how to get in:

1. Log in to PeopleFirst.MyFlorida.com.
2. Click on the *Chard Snyder* quick link.

Does Chard Snyder offer a mobile app?

Yes! Our mobile app offers an additional way to manage your plan. It's free from your app store. Use your smartphone or tablet to do the following:

- Scan for eligible items with the Expense Scanner.
- Check your balance for any plan.
- Review transaction details.
- Pay your service provider.
- Submit claims for your FSA or reimburse yourself from your HSA.
- See the status of claims.
- Submit receipts.

Flexible Spending Account Frequently Asked Questions

How do I log in to the mobile app?

To use the Chard Snyder Mobile app from your smartphone or tablet, do the following:

1. Download the Chard Snyder Mobile app from your app store.
2. Click the icon for the app.
3. Enter your username. It will be your People First ID number.
4. Enter your password. This will default as “Pf” and your date of birth in the following format: PfMMDDYY.
5. Create a four-digit passcode to use each time you log in through your mobile device.

Does Chard Snyder offer customer service via instant chat?

Yes. Live Chat is available Monday through Friday, 8 am to 5 pm ET.

Can I change the amount I am contributing during the plan year?

Generally, you cannot change the elections you have made after the beginning of the plan year. However, there are certain limited situations when you can change your elections. These situations are defined by the IRS and outlined in the plan's Qualifying Status Change (QSC) Event Matrix.

What happens when I leave my job or become ineligible for the benefit?

If you leave your current place of employment or become ineligible for the plan, you still have until the end of the runout period to submit claims for services or items purchased before you became ineligible. Any money remaining in your account at the end of your runout period will be forfeited.

If you choose to elect COBRA for your healthcare FSA, you will be required to continue to put the same amount of money in the account every month after tax as you put in before tax while you were still working for your former employer. Using COBRA to continue a healthcare FSA can be a way to use the balance in your account for eligible expenses you incur, following your termination.

If you participate in an FSA and terminate your state employment, you must complete a Flexible Spending Account Options When Employment Ends Form. Forms are available by accessing the MyBenefits website or by contacting the People First Service Center. If you terminate participation in the plan, claims for medical expenses incurred after the last payroll deduction, will not be eligible for reimbursement.

However, should contributions to your account stop for any reason, payment of claims will be suspended, regardless of your account balance. For participants who have terminated, claim payments will be suspended until the People First Service Center receives a signed Flexible Spending Account Options When Employment Ends Form with selection and payment. Participants going on leave must contact their personnel office for existing options.

How does the carryover work if I terminate employment and decide to continue my FSA?

If you continue your FSA by funding your account with your leave payout, the funds are available for services received by December 31 of the plan year. Claims incurred by December 31 can be submitted through the runout period for that plan year. Any balance left after the runout period would be forfeited.

If you continue your FSA by electing COBRA, you will have access to the full annual election amount throughout the COBRA period of coverage. You may submit claims through the end of the COBRA period.

Flexible Spending Account **Frequently Asked Questions**

Whom do I contact for more information?

If you require any assistance with your healthcare FSA, limited purpose FSA or dependent care FSA, please contact us.

Phone: 855.824.9284 Customer service representatives are available 8 am through 8 pm ET, Monday through Friday.

Email: FloridaAskPenny@chard-snyder.com For security reasons, please do not send claims or personal information through email.

Chat: Customer service representatives are available to chat 8 am through 5 pm ET, Monday through Friday. Log in to People First, click the *Chard Snyder* quick link; navigate to the Tools & Support tab; and click on 'Chat with us' link under Quick Links.



855.824.9284
PeopleFirst.MyFlorida.com

