

# Health Care Flexible Spending Account Carryover up to \$570

## Don't lose it! Carryover up to \$570!

That's right! No more use it or lose it! You can carryover up to \$570 of unused contributions into the following plan year (from 2022 into 2023). (Note: For 2020-2021 there is an unlimited carryover.)

## How does it work?

Assume you contributed \$2,000 into your HCFSAs. But, you only spent \$1,430 during the plan year. You can carry over the remaining \$570 into the next plan year! The \$570 carryover amount is in addition to your employer plan limit. For example, if your employer plan limit is \$2,850, you can carry over up to \$570 of unused funds for a total of \$3,420.

## What else should I know?

- If you have not participated in a health care FSA, now is the time! You can sign up for at least \$570 – you can't lose it as you can carry it over into the next plan year if you don't use it.
- You earn valuable tax savings by paying for recurring and predictable expenses with pretax dollars.
- By paying pretax, you do not pay federal or state tax (in most cases), or FICA tax. Most employees save at least 30% by paying pretax.
- If you have an HSA you cannot make contributions if you are enrolled in a general-purpose health care FSA. Contact your HSA custodian bank for more information. Your employer may allow you to convert carryover funds to a limited-purpose health care FSA or forfeit the FSA carryover funds if you wish to contribute to an HSA. Each plan is different so please confirm with your employer.

## Will I receive a debit card?

Yes. Each health care FSA participant will receive a set of two ASIFlex debit cards which can be used at the point of service to pay for health care services or products. Ask for and save itemized statements of services from the provider, and save insurance plan explanation of benefit statements (EOBs) as some transactions will require you to submit backup documentation to substantiate the expense.

## How do I submit claims and get reimbursed?

As you incur expenses, you can submit a claim to be reimbursed. ASIFlex offers several easy ways to submit claims for reimbursement. You do not have to choose only one option; you can use multiple options throughout the year.

- **ASIFlex mobile app** Download the app and log in to your account. Then, just snap a picture of your insurance plan explanation of benefits (EOB) statement, or itemized statement from your provider and submit a claim via the app. It's easy and it's fast!
- **ASIFlex Online** Sign in to your online account at ASIFlex.com to submit a claim.
- **Toll-free fax or mail** Download and complete a claim form. Then, submit it with your insurance plan EOB or provider itemized statement. Keep a copy for your records.

Reimbursements will be made to you within three business days following receipt of a complete claim. Log in to your ASIFlex account to sign up for direct deposit reimbursement to a bank account of your choice. You can also sign up for email and text alerts.

For more information, view the employer plan document or visit ASIFlex.com to obtain IRS Publication 502, Medical and Dental Expenses; a list of eligible expenses; and general plan information.

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## Manage your

**account** Register your account at ASIFlex.com to see your account statement and balance, submit claims, sign up for email, text alerts and direct deposit.

## Check out over-the-counter (OTC)

**products** Bandages, blood pressure monitors, diabetic supplies, contact lens solution, menstrual care products, sunscreen, drugs and medicines are just a few of the eligible OTC items. Go to ASIFlex.com and click on the FSA Store link.

## Get the ASIFlex app!

- Submit claims.
  - Submit documentation.
  - Access your balance and account statement.
- Search ASIFlex Self Service and download the app today.



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