

Participant FSA Manual



Flores
Simply Better Service
Flores247.com

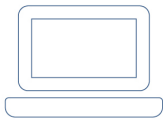
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How to Contact Flores & Associates



HOW DO I OBTAIN MY ACCOUNT DETAILS?



WEBSITE

Visit www.flores247.com and log in using Participant ID or User Name and password



MOBILE APP

Download our mobile app from your app store



PID & PASSWORD ASSISTANCE

Dial 800.840.7684

HOW DO I SUBMIT DOCUMENTS TO FLORES?

ONLINE

Visit www.flores247.com and upload documents securely

MOBILE

Download e-Receipt smartphone app
Available for Apple or Android devices

MAIL

Flores & Associates, LLC
PO Box 31397
Charlotte, NC 28231

FAX

704.335.0818 or 800.726.9982

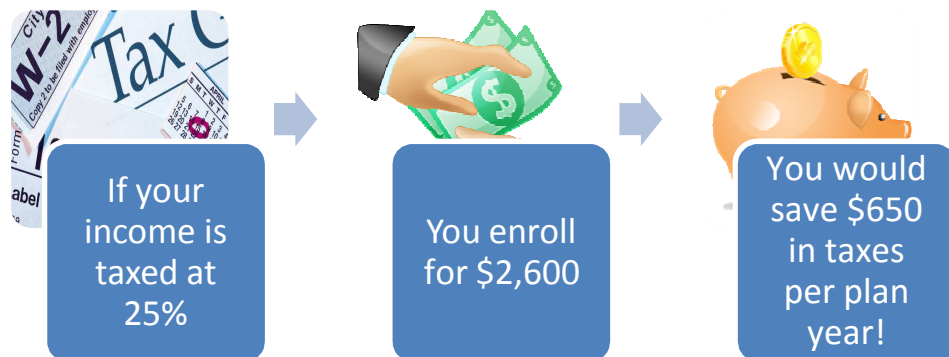
CUSTOMER SERVICE 1.800.532.3327

What is an FSA?

A flexible spending account (FSA) is a reimbursement plan governed by the IRS which allows employees to set aside a certain amount of their income to a designated account(s) before taxes are calculated. A FSA is not subject to payroll taxes, meaning **you save money**.

Realize the Tax Savings

You can set aside pre-tax money into an account to be reimbursed for eligible expenses. Savings will depend on your tax bracket.



How to Plan

	Participating in an FSA	Not Participating in an FSA
Annual Salary Before Taxes	\$30,000	\$30,000
Less:		
MRA Contribution	-\$2,600	\$0
DCRA Contribution	-\$5,000	\$0
Taxable Income	\$22,400	\$30,000
Estimated Taxes (based at 25% for Federal & FICA)	-\$5,600	-\$7,500
Less:		
Health Care Expenses	\$0	-\$2,600
Dependent Care Expenses	\$0	-\$5,000
Net Disposable Income	\$16,800	\$14,900
Estimated Savings	\$1,900	

Types of FSAs

	Medical FSA	Dependent Care FSA
What does the account do?	The Medical FSA can reimburse you for eligible medical expenses for you, your spouse, your children (under age 26), and your tax dependents.	The Dependent Care FSA can reimburse you for daycare expenses provided for your dependent that allow you (and your spouse, if applicable) to work. Care must be for a dependent child under the age of 13 or a dependent of any age that lives in your household and is incapable of self-care.
What expenses are eligible for reimbursement?	Copays, deductibles, prescriptions, eligible OTC items, prescribed OTC medications, eligible medical supplies, etc. Dental, vision, hearing, orthodontia expenses. For a full list of eligible expenses see flores247.com resource center "Allowable FSA Medical Expenses" and "Allowable FSA OTC."	Daycare, after school care, au pair, nanny care, individual daycare provider (if over age 18), etc. For a full list of eligible expenses see flores247.com resource center "Allowable Dependent Care Expenses."
What is the maximum amount of money you can contribute to the account?	\$2,600 per plan year (unless otherwise specified by employer)	\$5,000 per plan year (unless otherwise specified by employer)
When are you reimbursed?	After your first Medical FSA contribution to the plan, you will have access to the total amount you have elected for the year, regardless of the balance in your spending account. You are reimbursed based on your company's chosen payout schedule as you submit claims. You can either be mailed a check for the reimbursement or you can set up direct deposit.	You are reimbursed daily based on the contributions you have made to the account. You can even submit one claim for the whole year and be automatically reimbursed based on the contributions posted to your account. You can either be mailed a check for the reimbursement or you can set up direct deposit.
How does Flores get contributions?	Contributions are deducted pre-tax from your paycheck by your employer and sent to your account at Flores.	Contributions are deducted pre-tax from your paycheck by your employer and sent to your account at Flores.
Can I change my election during the plan year?	Status Change rules apply. You can only change your election mid-year if you experience a status change (i.e. marriage, birth, death, divorce, etc.) Please see your employer's Summary Plan Description (SPD) for further details.	Status Change rules apply. You can only change your election mid-year if you experience a status change (i.e. marriage, birth, death, divorce, child care cost or coverage change, etc.) Please see your employer's Summary Plan Description (SPD) for further details.

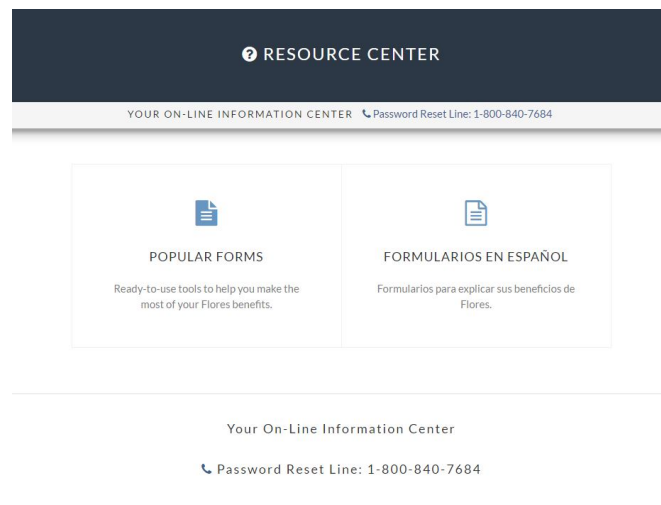
Once Enrolled

Once you are enrolled you can expect to receive your debit card in the mail (if your company allows use of the debit card), and PID Number letter in your email (or mail if no email address is provided). You can begin using your funds and submitting claims for eligible expenses once Flores has received your first contribution of the plan year.

PID Letter

In order to ensure the security of your personal information, Flores & Associates does not use Social Security Numbers as an identifier. We have created a Participant ID number (PID) that is a 9 digit number created uniquely for you and can be used when corresponding with Flores over the phone, online, or through the mail. To inform you of this number, a custom PID Number will be emailed to you (or mailed if no email address is provided). Make sure to keep to this number for future reference.

For more information see **"Resource Center"** (on Flores247.com homepage)



Participants often use the Resource Center to find:

- Lists identifying allowable medical, OTC, and Dependent Care items
- Savings Calculator to determine the tax savings within a given plan year
- Education material provided in Spanish
- A direct link to the FSA store

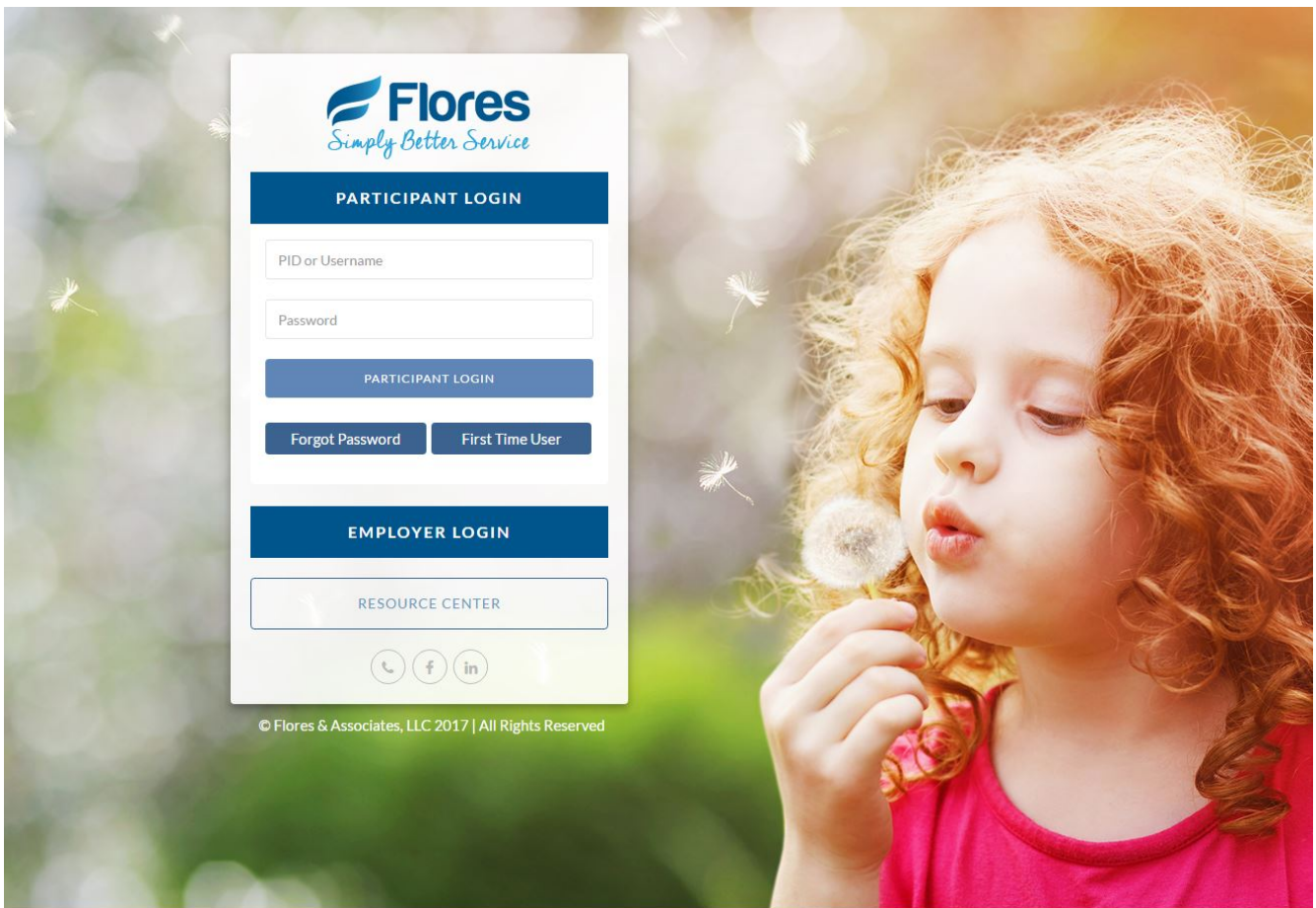
www.flores247.com Participant Web Site

Getting Started

When you enroll with Flores for the first time, you will receive an email (or a mailing at your home address if no email address is provided) that provides you with your **Participant ID** number, known as PID, and your default **Password**. This will be your original login information to our secure Flores247.com site.

Participant Login Page

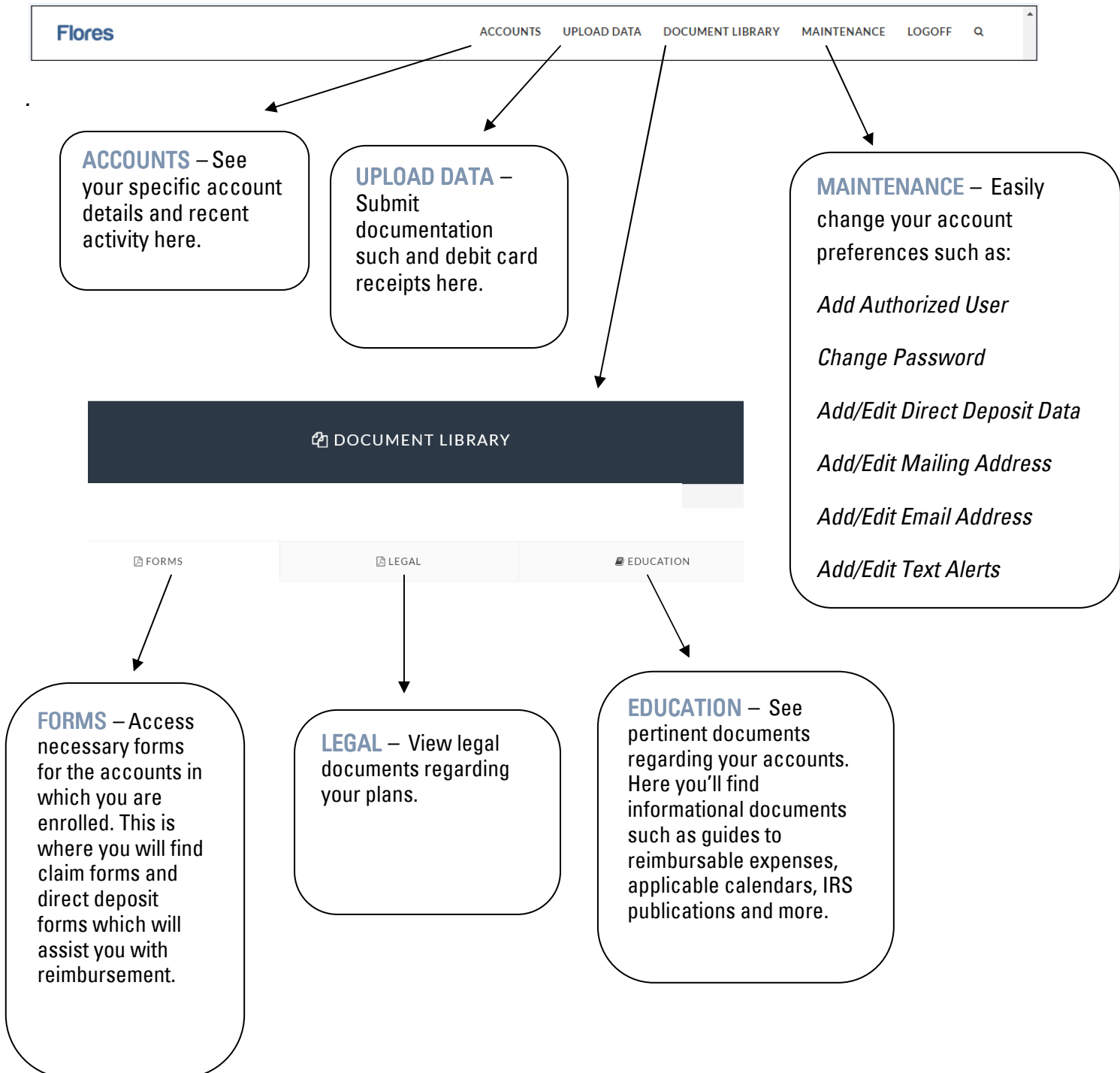
On the login page, you have access to documents regarding general guidelines, worksheets, eligible FSA expenses, and our documents available in Spanish. These can be accessed by clicking on the **Resource Center** button.



Main Tabs

The first time you log into the Flores247.com site with your PID and Password you will arrive at the **ACCOUNTS** page, where you can view your specific account details such as balances, enrollment periods and year to date expenditures.

Along the top of the screen you will see the following links in the **header**. These links will help you navigate through the site, update your contact information and download necessary forms.





WHENEVER...WHEREVER...WITH E-RECEIPT

Download e-Receipt today



USING THE FLORES E-RECEIPT MOBILE APP IS EASY!

SUBMIT RECEIPTS IMMEDIATELY AFTER YOU USE YOUR BENNY CARD OR INCUR AN ELIGIBLE OUT-OF-POCKET EXPENSE

- Logon with your PID or username and password
- Click Capture to take a photo of your documents
- Return to main screen and click Submit Document
- Once your upload transmits you will receive confirmation via email or text message
- Additional confirmation will be sent once your document is processed

- ✔ SNAP PICTURE
- ✔ SELECT DOCUMENT
- ✔ UPLOAD RECEIPT
- ✔ SUBMIT CLAIM
- ✔ VIEW ACCOUNT
- ✔ CHECK BALANCE
- ✔ EMAIL ACCOUNT MANAGER

How to Submit a Claim

Claims may be submitted by:

- **Fax:** 800-726-9982
- **Mail:** P.O. Box 31397 Charlotte, NC 28231-1397
- **Online:** www.flores247.com
- **Mobile App:** Flores e-Receipt

Submit Online Claim

To get started, click 'Upload Data' on the home page.

Step One: Select 'MRA Claim' in the Select Document Type dropdown menu. Click Next.



STEP ONE
Select Document Type

Select Document Type: MRA Claim

CANCEL NEXT

Step Two: If you have completed a hard copy claim form and scanned it into your computer for this submission, click 'Already Completed.' If you have not already completed and scanned a hard copy claim form, complete the table with your claim detail.



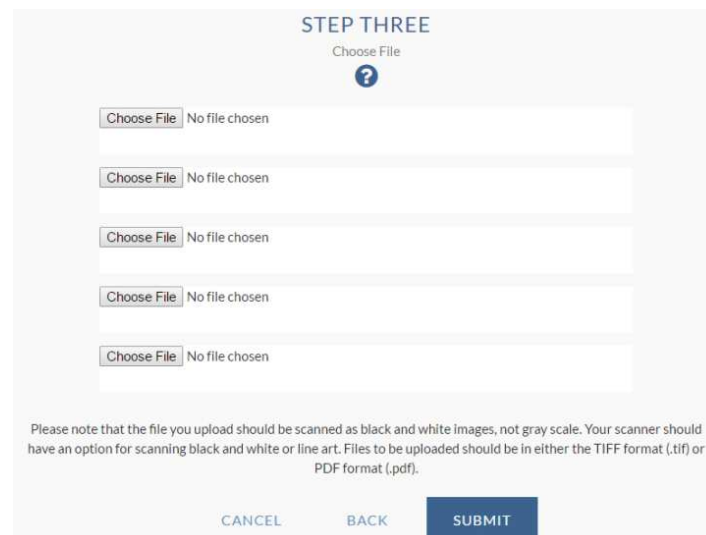
STEP TWO
Medical FSA

Service Date	Service Type	Patient	Provider	Amount
mm/dd/yyyy	Medical	Patient	Provider	0.00
mm/dd/yyyy	Medical	Patient	Provider	0.00
mm/dd/yyyy	Medical	Patient	Provider	0.00

If you do not complete the online form or you do not upload a completed claim form your claim will be rejected until we receive the claim detail from you.

CANCEL BACK ALREADY COMPLETED NEXT

Step Three: Click 'Choose File.' Select the file from your computer that you wish to upload. Repeat until all documents are attached. Click 'Submit' to finalize your claim.



STEP THREE
Choose File

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Please note that the file you upload should be scanned as black and white images, not gray scale. Your scanner should have an option for scanning black and white or line art. Files to be uploaded should be in either the TIFF format (.tif) or PDF format (.pdf).

CANCEL BACK SUBMIT

0
HOURS

1 Participants access account balance & activity through Customer Service at 1-800-532-3327

----- or -----

Participants access website www.flores247.com -View Account Activity
-Download Claim Form
-Change PIN or e-mail

2 Claim may be submitted to FLORES by fax, mail, online, or via flores e-receipt app

3 CLAIM RECEIVED by **Flores**

4 *e*status sends e-mail to participant confirming claim receipt.

5 Claim scanned & logged into FSA Direct system

24
HOURS

1 FLORES adjudicates & enters claim

2 *e*status sends e-mail notice advising claim has been entered for payment

3 Claim Approved?

4 Customer Service Letter Issued via email if not approved. If no email is on file it will be mailed.

5 Participant provides requested information

48
HOURS

6 Reimbursement Issued
Medical payments released per employer's schedule.
Dependent Care payments released per pay cycle

7 Check mailed directly to participant or Direct Deposit issued to participant's personal bank account

8 *e*status sends e-mail notice with details that reimbursement was issued

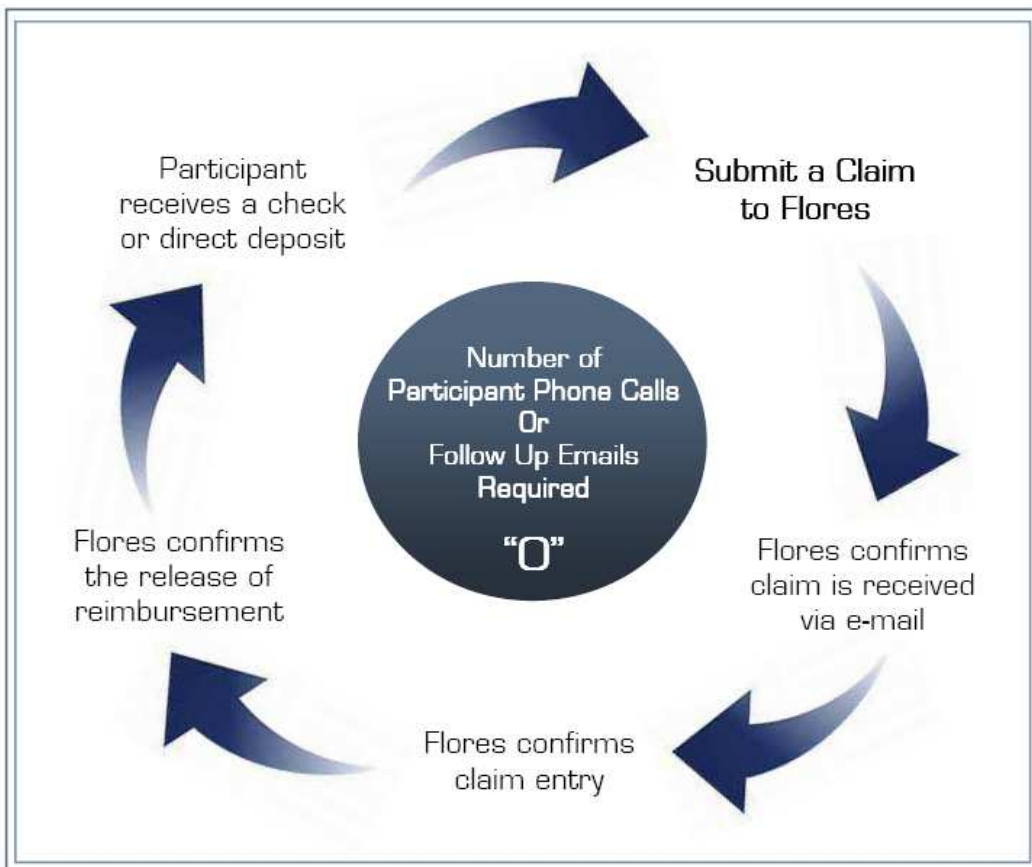
9 Account activity report issued with each reimbursement

E-status system & Text Messaging

The e-status system is a great way to stay in touch with your Account Manager and keep you in the loop about your account(s) with Flores. Available by email and text messaging, it provides you with regular updates about your documentation and claim status.

To sign up for e-status updates, simply add your email address and/or cell phone number and carrier to your account on www.flores247.com. You can customize your text message settings to receive up to three types of notices: 1. claim received (notification we're in receipt of your claim), 2. claim entered (notification your claim has been processed), 3. check cut (notification your reimbursement has been issued as a check or direct deposit, depending on your account setup).

Flores *e*-status System Communicates with Participants Proactively



Claims submitted to Flores by Wednesday at 4PM Eastern are released for payment on Friday, with E-status confirmations every step of the way.

Any rejections are communicated thoroughly. Dedicated account managers are available by telephone and e-mail instead of a phone tree.

Deadlines for your Account

Please be mindful of your plan's claim filing deadline. This is typically 60 – 90 days after the plan year ends. All claims must be postmarked, faxed, or submitted online on or before the claim filing deadline date. It is important to know this date as any claims not submitted timely will be rejected.

For your specific claim filing deadline, you may check the deadline listed on your claim form, or you are welcome to call or email your Account Manager. To reach your Account Manager, please call our office at 800-532-3327.

Medical Flexible Spending Account Rollover

Your employer may allow the Rollover for your medical flexible spending account. The IRS allows a maximum of \$500 to rollover from the previous plan year. Re-electing a new amount in the medical FSA is not necessary to allow for the rollover. You must be benefit eligible.

You are eligible to elect the medical FSA maximum, \$2600, and have the maximum \$500 rollover in the same plan year. Please check your Summary Plan Description to verify if this applies to your plan.

Grace Period Transactions for your FSA

Your employer may allow for grace period transactions. The grace period feature of the medical FSA allows you, as the participant, to incur expenses for 75 additional days after the last day of your plan year. For example, your employer's FSA plan year is 1/1/2015 - 12/31/2015. With the grace period, you have until 3/15/2016 to incur expenses to exhaust your 2015 funds. Please check your Summary Plan Description to verify if this applies to your plan.

Debit Card



Advantages of the Debit Card with your Medical Flexible Spending Account

1. Your full election is on the card on day one of the plan
2. Fewer out of pocket transactions because your funds are loaded on the card
3. Provider is paid at the point of the transaction
4. 80-90% of your transactions are automatically substantiated; meaning Flores will not request documentation for co-payments and prescription transactions. In addition, transactions are auto-substantiated when recurring expenses match the same provider and dollar amount for previously substantiated transactions.

Per the IRS, Flores will request documentation for transactions other than standard health insurance co-payments or prescriptions. The transactions we request documentation for include those incurred for dental expenses, vision expenses, and medical amounts applied to your deductible or co-insurance. The IRS allows this pre-tax benefit as long as you, as the account participant, supply documentation that indicates the service was FSA eligible. For any notice requiring documentation, we contact participants directly by e-mail, or if no email address is on file, notices are sent via mail to their home address. Participants are contacted three times for each transaction requiring documentation and their card privileges are suspended if a response is not received. In addition, once the card is suspended we reduce any paper claim reimbursements filed by the amount of any unsubstantiated debit card transactions.

Example of IRS Requirements for Substantiation

I am participating in the medical FSA and my employer has a FSA plan year of 1/1/2015 - 12/31/2015. I swipe my card on 1/10/2015 for a 12/20/2014 service at the hospital. Flores, per the IRS, sends me an email requesting documentation for this service. The service is a FSA eligible service but the date of service makes this an ineligible transaction. In this example, my 2015 funds should be used for 2015 services only.

Ways to Submit Debit Card Documentation to Flores

1. Flores E-Receipt App for your iPhone or Android devices (log-in information necessary)
2. Flores247.com (log-in information necessary)
3. Fax - 704-335-0818, 800-726-9982
4. Mail - PO Box 31397 Charlotte, NC 28231-1397

Submitting Debit Card Documentation – Website Snapshot

STEP ONE
Select Document Type

Select Document Type: Debit Card Receipts

CANCEL NEXT

STEP TWO
Choose File

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Please note that the file you upload should be scanned as black and white images, not gray scale. Your scanner should have an option for scanning black and white or line art. Files to be uploaded should be in either the TIFF format (.tif) or PDF format (.pdf).

CANCEL BACK SUBMIT

What should I do if my Debit Card is suspended?

There are three options to clear up unsubstantiated charges:

1. Submit the requested documentation for the transaction in question or
2. Submit documentation for unreimbursed eligible expenses that can be used to offset the amount in question with a note of explanation or
3. Refund your account the amount in question by mailing a check directly to Flores & Associates (these funds would be re-applied to your card for future use)

Scenario of Substantiating a Debit Card Transaction

Ex. My employer's FSA plan year runs 1/1/2015 - 12/31/2015. I swiped my Debit card in January 2015 for a December, 20 2014 medical expense (\$300). I submitted my documentation to Flores because it was requested per the IRS regulations. The January 2015 transaction was deemed an ineligible transaction because 2015 funds should only be used for 2015 services.

Resolution: You may either send a check to Flores & Associates (\$300 in this example) to clear the transaction and put funds back on your Debit card or you may submit receipts for 2015 FSA eligible services/expenses that you paid out of your own pocket to offset the ineligible expenses. You may simply add a note on your itemized receipt with your request to offset, add your nine digit PID number and submit to Flores. Documents will be processed within 24 hours.

FSA Debit Card Substantiation

