



Know your options. Enjoy the advantages.

City of Salem 2024 Open Enrollment Packet

This packet includes general information and forms related to the plans that are available to you through your employer. Not all of the information, maximums or benefits and examples may be applicable to you. Please refer to your summary plan documents for benefit that are specific to plans offered through your employer.



Sign up for a flexible spending account – and start saving

Today, everyone is faced with rising healthcare costs and complex employee benefits. At BenefitHelp Solutions, helping you means more to us than just paying claims and answering phones quickly. It's about helping you understand your benefits and saving you money.

Did you know that there's a simple way to get your hands on additional spendable income, month after month? If you, like most people, spend a few hundred dollars or more each year in out-of-pocket healthcare costs, you can get 25 to 40 percent of that money back in your pocket when you sign up for a Flexible Spending Account (FSA).

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How an FSA works

With an FSA, you determine how much out-of-pocket childcare and healthcare expenses you have each year, and then you have that amount (divided by the number of payroll periods) automatically set aside from your paycheck. The money is pulled out before taxes are deducted and held in a special account for you. When you start paying healthcare or dependent care expenses, you get reimbursed from your FSA account — and that money never gets taxed. The bottom line: you get more spendable income for paying off credit-card debt, planning a much-needed vacation or finally getting yourself an iPhone. What will you do with the money you'll save?

Manage your flexible spending account online

Log on to benefithelp.com 24/7 to view your account activity, submit claims, and update your profile information.

Example of Peter's annual savings	With an FSA	Without an FSA
Peter's taxable income	\$30,000	\$30,000
Pre-tax amount deposited into an FSA	\$1,200	\$0
Peter's taxable income	\$28,800	\$30,000
Subtract estimated Federal, State & FICA taxes	\$8,060	\$8,400
Take home pay spent on FSA eligible expenses	\$0	\$1,200
Peter's actual spendable income	\$20,740	\$20,400
Annual savings	\$340	\$0

In this example, Peter is saving \$340 by simply enrolling in an FSA. Enroll in a dependent care account as well and save even more. Your savings results may vary based on your income, tax bracket and amount contributed to the FSA account.

Two account types

Healthcare Spending Account

A Healthcare Spending Account allows you to pay for eligible expenses not covered by your healthcare plan. Some eligible expenses include:

- ✓ Deductibles, copayments and coinsurance for medical and dental plans
- ✓ Prescription medications and approved over-the-counter healthcare products
- ✓ Eye exams, glasses, prescription sunglasses, contact lenses and solutions, and LASIK eye surgery

Dependent Care Spending Account

A Dependent Care Spending Account reimburses you for care provided by eligible caregivers for dependents age 12 and younger, or for a disabled spouse or other dependents whom you claim for tax purposes. A few examples of eligible dependent care expenses:

- ✓ Care provided in your home by an eligible caregiver
- ✓ Care provided outside your home at a qualified day care provider
- ✓ Care provided at a licensed day care facility
- ✓ Summer day camps
- ✓ Before- and after-school programs

For more detailed dependent care information, click on FSA Accounts in the member section at benefithelp.com.

Coordination with health savings account

Involvement in a regular health FSA or HRA makes an individual ineligible to participate in a health savings account (HSA); however, a limited health FSA or limited HRA does not violate any eligibility for an HSA. Participants that would like to preserve their HSA eligibility may be able to rollover available contributions and elections from a regular health FSA or HRA to a limited health FSA or limited HRA. Participants in both a limited health FSA or limited HRA and an HSA cannot receive reimbursement for the same expense from both accounts.

Contributions

The amount you elect to have withheld for your limited health FSA is contributed over the plan year, or applicable period of coverage, in equal amounts each pay period. Contributions are withheld from your wages and are usually excluded from taxes. Outlined in your Summary Plan Description are any maximum and minimums imposed by your employer. All contributions will be made by employer for your HRA, and contributed in accordance with the schedule outlined in your Summary Plan Description.

Accessing funds

A participant can access his or her funds by:

- Using a Benefits Visa (benefits card); or
- Paying for an eligible expense, then requesting reimbursement

Questions?

Contact a BenefitHelp Solutions customer service representative at 855-378-0197 for more information.

The benefits card can be used wherever Visa is accepted. The amount of the transaction will be automatically deducted from your account to pay the provider or vendor. Some charges will be automatically substantiated; other expenses will require additional documents to establish the eligibility of your purchase. BenefitHelp Solutions will send a letter requesting additional documents if they are necessary. If your employer does not offer a Benefits Card or if you have elected not to receive a benefits card, you can pay for the eligible expense and then request reimbursement from your limited health FSA or limited HRA. BenefitHelp Solutions will request a claim form be filled out and you include proper documentation. You can submit your claim reimbursement request through the participant portal, via mail, fax or email. Once your claim has been approved, you will receive a reimbursement check or, if you elected to receive direct deposits, your reimbursement will be directly deposited into your bank account.

Forfeiting funds

Your entire limited health FSA election or limited HRA provided by your employer must be used within the plan year or applicable period of coverage. Any funds remaining at the end of the plan year or applicable period of coverage could be lost. Please consult your Summary Plan Description for any available carryovers or grace periods that may influence the forfeiture of unused funds.

After enrollment

Once enrolled, BenefitHelp Solutions will send a welcome letter to confirm your selections. This letter will contain a personal identification number (PIN) for access to your account online. Through the online portal, you can view your claims, submit claims and track your balance.



Limited Purpose Accounts

A limited purpose health flexible spending account (limited health FSA) or limited purpose health reimbursement arrangement (limited HRA) is just like your regular health FSA or HRA, except that it only reimburses expenses for vision and dental care.

Eligible expenses

- Dental expenses, such as cleanings, fillings, crowns and orthodontia
- Vision expenses, such as contact lenses, eyeglasses, refractions and vision correction procedures

The definition of dependents under federal guidance has been expanded to include adult children up to the age of 26. This means your health FSA may pay for eligible medical care expenses of your dependent through the age of 26.

When to enroll

- When you are first hired, you will be invited to join the limited health FSA or limited HRA once any probationary periods have ended. Please see your summary plan document regarding the procedure for enrolling once you are eligible to participate.
- After an applicable change in status, you may be allowed to make changes to an election you made when you were first hired or during open enrollment. Please see your Summary Plan Description for a list of applicable change in statuses and any timelines imposed.
- During open enrollment, you must make new elections. You may change your election or decide not to participate. Open enrollment usually occurs a month or two prior to the start of the plan year. Your human resources department will provide additional information regarding your open enrollment.

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Determining your FSA contribution

To help you determine how much money you should set aside for your FSA, use this worksheet to calculate your out-of-pocket expenses for the year. For a full list of eligible FSA account expenses and eligibility requirements, visit us online at benefithelp.com/members/resources/eligible-healthcare-expenses.

Healthcare Expenses	
Medical expenses not covered by insurance	Annual estimate
Deductibles, copays, coinsurance	
Prescription drugs	
Over-the-counter items	
Dental expenses not covered by insurance	Annual estimate
Checkups and cleanings	
Fillings, X-rays, crowns, bridges	
Dentures, inlays	
Orthodontia	
Vision and hearing expenses not covered by insurance	Annual estimate
Exams	
Prescription eyeglasses	
Contact lenses and cleaning solution	
Corrective eye surgery (LASIK, cataract, etc.)	
Hearing aids and batteries	
Total healthcare expenses	\$
Dependent care expenses	Annual estimate
Licensed day care, nursery or pre-school	
Before and after school programs	
Summer day camps	
Total dependent expenses	\$



Flexible Spending Account Carryover

A carryover allows you to transfer up to the IRS carryover maximum of \$610 (or your plan's carryover maximum amount if different) of your remaining balance at the end of the plan year into the following year. Think of it like a safety net for your FSA. If you end up spending less than you anticipate when making your elections during open enrollment, you can tap into those funds next year.

- ✓ Carryover funds become available to you on the last day of the plan year. They can be used for both prior plan year and current plan year expenses through the run-out (claim filing) period. After the runout period the carryover funds can only be used for current plan year expenses.

You are able to carry over up to \$610 while still electing the full maximum annual election in the new plan year.

- ✓ If you have the payment card, it will continue to work as normal, using your carryover funds first.



BenefitHelp
SOLUTIONS



Hassle-free Reimbursement

Payment

Benefits Card

Not all employers offer the Benefits VISA (Benefits Card) option. To find out if you are eligible for a Benefits Card, please contact your group administrator.

The Benefits Card provides direct access to your Flexible Spending Account, allowing you to pay for eligible healthcare expenses at qualified locations wherever VISA is accepted. When you use your Benefits Card, you no longer have to wait for reimbursement because the money is deducted directly from your FSA account at the time of purchase. However, in most instances, you will still have to submit supporting documentation for your purchases. Your Benefits Card can be used at participating grocery stores, pharmacies and wholesale clubs with vision and pharmacy services (most of these stores have elected to participate in the IRS Benefits Card program); or at hospitals, and medical, dental and vision provider offices.

When you're at the grocery store or pharmacy and it's time to pay, swipe your Benefits Card and select "Credit," if asked. The Benefits Card automatically approves your eligible items and debits the money from your FSA account. If you are also buying non-eligible items, the terminal or clerk will ask you for another form of payment. Then just pay the remainder with another card, cash, or check as you'd normally do.

When paying for services provided by a medical, dental or vision care provider, the Benefits Card can automatically approve services that match a set copay or a multiple of that copay (not coinsurance) from your group health plan(s). Supporting documentation for these services is not needed; however, if the provider's charge is an amount other than the copay, you can still use the Benefits Card to have the expense directly deducted from your account. You will just need to submit supporting documentation to BenefitHelp Solutions when you receive the letter requesting it. **The Benefits Card should only be used to pay for expenses incurred in the current plan year. If it is used for prior plan year expenses, you will be required to refund your account.**

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Reimbursement

AutoPay

Not all employers offer the AutoPay option. To find out if you are eligible for AutoPay, please contact your group administrator.

AutoPay is an option that allows you to be reimbursed automatically for your eligible out-of-pocket medical, dental and prescription expenses processed by your medical administrator without having to submit claim forms or supporting documentation (currently, Moda and Delta Dental is the only administrator eligible). When your medical administrator receives a claim from your provider, they will process and pay the claim according to your plan benefits. The administrator will send you an Explanation of Benefits (EOB) and, at the same time, send the information to BenefitHelp Solutions for automatic reimbursement of eligible out-of-pocket expenses. The amount shown on the EOB in the Patient Responsibility column is the amount you will automatically receive — up to your annual FSA election amount.

Orthodontia and IRS-ineligible expenses, such as cosmetic procedures, are excluded from AutoPay.

Direct deposit

By having your Flexible Spending Account reimbursement directly deposited into your bank account, you eliminate the hassle of having to go to the bank each time you receive a check. Instead of receiving a reimbursement check in the mail, you will receive a Direct Deposit Remittance Advice. The Remittance Advice will provide a full explanation of what was paid. All direct deposits will be initiated on the same day as the normal check reimbursement date.

Contact us

benefithelp solutions.com

phone: 855-378-0197



Eligible medical care expenses

Commonly asked questions about over the counter medications and items, adult children and the coordination of multiple accounts.

Medical care expenses for you, your spouse and your dependents are all available for reimbursement or purchase with your healthcare flexible spending accounts (health FSAs), 213(d) healthcare reimbursement arrangements (HRAs) and health savings accounts (HSAs). Eligible medical care expenses include many over the counter items that you purchase without the involvement of your physician or insurance.

Over the counter items

Over the counter items that have an established medical function, do or do not, contain an active ingredient are available for purchase using your account without involvement from your healthcare provider. This includes things like:

- Band aids
- Braces and supports
- Catheters
- Contact lens supplies and solutions
- Denture adhesive
- Diagnostic tests and monitors
- Elastic bandages and wraps
- Insulin and diabetic supplies
- Ostomy products
- Reading glasses
- Wheelchairs, walkers and canes

Stockpiling is not permitted. Only reasonable quantities to be used in the plan year of the same over the counter item can be reimbursed. BenefitHelp Solutions interprets reasonable to be no more than three of the same over the counter product purchased in a single month. If there is a medical condition requiring more than what BenefitHelp Solutions considers reasonable, you may submit a letter of medical necessity.

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Adult dependents

The definition of dependents under federal guidance has been expanded to include adult children up to the age of 26. This means your health FSA may pay for eligible medical care expenses of your dependent through the age of 26.

Does my adult dependent have to be a tax dependent?

No. Your adult dependent does not have to be your tax dependent, living with you or attending school. However, any dependents of your dependent will not be eligible unless they are your tax dependent.

If my dependent will be 27 in June and my plan year ends in December, can I claim his or her expenses through May?

No. The IRS allows you to use your account for dependent claims only if that dependent will not be 27 during the tax year, January to December.

If my 24-year-old child has insurance through his employer, does the employer plan have to pay or deny eligible medical care expenses before I can use my account to pay the medical expenses?

Yes.

Understanding the limit for your health FSA

An employee of a specific (or related) employer can have just one health FSA and the election for that health FSA cannot exceed the IRS limit.

What if I have a second job and my second job offers a health FSA?

You may elect to participate in the second health FSA and make the full IRS allowed election amount election.

My spouse also has access to a health FSA. Are there any restrictions on their election?

Your spouse, regardless of whether he or she has the same employer, can make an independent election of up to the IRS maximum.

How do I submit claims for reimbursement from my health FSA when I have more than one insurance plan covering me?

When you have more than one insurance plan, the expense must be processed by all of your insurance carriers before you submit your claim for reimbursement or use your benefits card to pay for the final cost.

My spouse and I both have a health FSA; how do we submit claims using both accounts?

You may use both accounts as you normally would, just be careful to not submit the same expense to each account.

Questions?

Contact a BenefitHelp Solutions customer service representative at 855-378-0197 for more information.

Why pay tax on the items you need?

With a flexible spending account (FSA) you can use tax-free funds to take your health to the next level from out-of-pocket medical costs to eligible health products that help you feel your best.



The largest selection of guaranteed FSA eligible products



Shop with your FSA card or any major credit card



Check what's eligible in our **expansive eligibility list**



Get money-saving tips from our Learning Center



Questions? **Access 24/7 support** (call or chat)

\$20
OFF \$200

One use per customer
Expires 12/31/2024

Visit fsastore.com/BenefitHelpOE for the largest selection of exclusively FSA eligible products with zero guesswork.

Use code **BenefitHelpOE20** at checkout.

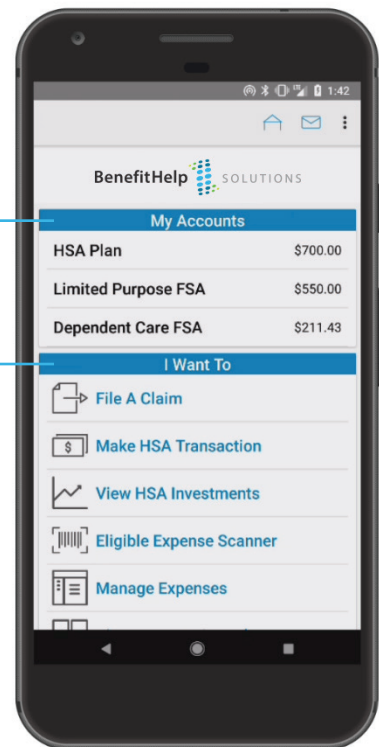


Manage your benefits *on the go.*

Want an easy way to check your account balances and submit receipts from anywhere? The BenefitHelp Solutions Mobile App lets you access your accounts with a touch of a finger. Designed to help you quickly find what you need, our Mobile App provides secure, on-the-go access to all your accounts.

Use the "I Want To" section to make payments, view HSA investments and scan items for eligibility

View balance information for your account(s) right away



Stay up to speed

Wondering whether you have enough money to pay a bill or make a purchase? The BenefitHelp Solutions Mobile App puts the answers at your fingertips*:

- Enjoy real-time access including an intuitive app design and navigation
- Log in to your account(s) using your fingerprint
- Quickly check account details for medical and dependent care
- View account summary
- View in-app messages and text alerts that provide instant notifications about your account(s)
- Access a list of eligible expenses
- Retrieve a lost username or password
- Use app with Apple® or Android™ smartphone

Tap to take action

Whether you're on the couch, waiting in line, or at your desk, you can use the BenefitHelp Solutions Mobile App to take action quickly.*

- Submit claims for medical and dependent care FSA, HRA, VEBA, transportation, tuition and premium reimbursement plans
- Snap a photo of a receipt to submit now or store for later
- Make an HSA distribution or contribution and view HSA investment details
- Use the Eligible Expense Scanner to determine if a product qualifies as a medical expense
- Pay yourself or your care provider
- Add and store information on new payees
- Enter and view expense information and receipts
- Report a debit card as lost or stolen

Imagine what you can do with The BenefitHelp Solutions Mobile App

Check balances

Wondering if you can pay for an elective procedure? No need to wait for an answer — your account balance is right at your fingertips.

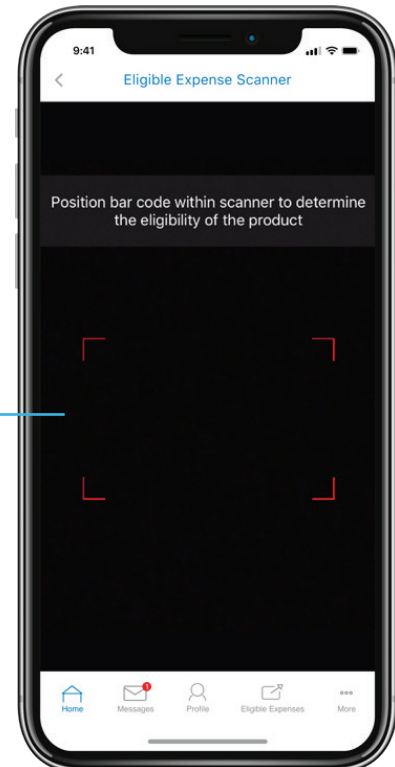
Scan expenses

Scan a product bar code to find out if it qualifies as a medical expense.

With a quick barcode scan, you'll know in an instant whether an item qualifies as an eligible expense

Make payments quickly

Capture receipts and record eligible expenses when they happen. Add payees and pay bills from any account.



Get started with the BenefitHelp Solutions Mobile App in minutes.



Download the BenefitHelp Solutions app for your chosen device from the Apple App Store or Google Play and log in using the password you use to access the BenefitHelp Solutions consumer portal.

** Some functionality listed may require additional products and services*

Get help anytime!

BenefitHelper is available 24/7/365 to help you with your account, debit card, claims, receipts and much more.

Need to know your account balance? Want to view a claims status? No problem. Simply access our new automated chat tool, BenefitHelper, 24 hours a day, seven days a week, 365 days of the year, to get the answers you need, when you need them.

With BenefitHelper, you can get quick answers to your most frequently asked questions about your account, debit card, claims, receipts and much more.



Account

- Account balances
- Eligible expenses



Debit card

- Debit card status
- Debit card replacement
- Report lost/stolen card



Claims

- Claims status
- Denied claims



Receipts

- Upload and view receipts
- Receipt validation/documentation help

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How to access BenefitHelper

Just follow these easy steps to access BenefitHelper.

1. Log in to your BenefitHelp Solutions member portal at bhsconsumer.lh1ondemand.com.
2. Select the “Need Help” icon to get started.

Don't have a member portal account?

To create a new account, visit bhsconsumer.lh1ondemand.com. Select “Get Started” and complete the information to verify your identity.

Questions?

We're here to help. Please call BenefitHelp Solutions at 855-378-0197.