



The SISC Flex Plan helps you save money on health and dependent care expenses and allows you to spend it on the things you care about. The SISC Flex Plan will have the whole family cheering!

Taxes 101

The federal government takes about 30% of each dollar you earn in FICA and federal income taxes, and you take home the remaining 70% to use for your living expenses. When you use an FSA, you set aside money before it is taxed, so you spend the entire 100% of your earned income on your health and day care expenses.

How much could you save?

Let's look at an example: Employees A and B both earn \$55,000 per year. They each have \$2,650 in out of pocket health care expenses.

Employee A and Employee B have the same earnings and tax bracket, but Employee B saves \$795 per year by contributing to an FSA!

Employee A	
Annual gross income	\$55,000
Estimated taxes (30%)	-\$16,500
Annual net income	\$38,500
Out-of-pocket health care expenses	-\$2,650
Actual take home pay	\$35,850
Employee B	
Annual gross income	\$55,000
Out-of-pocket health care expenses	-\$2,650
Adjusted gross income	\$52,350
Estimated taxes (30%)	-\$15,705
Actual take home pay	\$36,645

How does it work?

- During your open enrollment estimate your expenses for the plan year and enroll in the plan.
- Your annual election amount will be evenly deducted pre-tax from your paycheck throughout the plan year.
- You cannot change your annual election amount after the plan starts unless you have a qualified change in status. For example, birth, death, marriage or divorce.
- Check out tutorial videos on the Navia website for additional details on how your plan works.

Visit or contact us:

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How do I access my benefits?

Accessing your benefits couldn't be easier, just swipe your Navia Benefit Card to pay for eligible health care expenses. Funds come directly out of your Health Care or Limited Purpose Health Care Expense Account and are paid to the provider. The card is accepted at participating merchants using the Inventory Information Approval System (IIAS) and at medical care merchants using the Master-Card® system. Some swipes require us to verify the expense, so hang on to your receipts! If we need to see it, we will send you an email or notification via our smartphone app.

You can also submit claims online, through our smartphone app for Android and iPhone, or by email. Claims are processed within a few days and reimbursements are issued according to your employer's reimbursement schedule. Be sure to include documentation that clearly shows the date, type and cost of the service.

Submitting claims is easier than ever using FlexConnect

The FlexConnect feature connects your Health Care or Limited Purpose Health Care Expense Account to your insurance plans and seamlessly creates a claim with proper documentation direct from your insurance carrier! All you have to do is click "reimburse me" and the claim is expedited for payment. Sign up for FlexConnect today!

Get more with the MyNavia mobile app

The MyNavia app is free to download on both iPhone and Android. Order additional debit cards, update bank and address information and see up to date details of your benefits. MyNavia app allows you to simply snap a photo and submit for reimbursement direct from your mobile phone.



Benefits made so simple...
anyone can do it!

Show me my pre-tax solutions:

Health Care Expense Account (Annual Maximum \$2,650)

The Health Care Expense Account allows you to pay for out-of-pocket medical, dental, and vision expenses with tax-free dollars. Think of the account as a tool to pay for all your regular medical expenses throughout the plan year.

- Expenses for you, your spouse and dependents are eligible for reimbursement, regardless if they are covered on your medical plan.
- The Health Care Expense Account is a pre-funded benefit. This means you have access to your full annual election amount at any time during the plan year.
- Estimating future expenses is an important step as you prepare to enroll in an account. The more accurate you are in estimating your expenses the better the plan will work for you!

Common Eligible Expenses

- Prescription drugs
 - Copays and coinsurance
 - Deductibles
 - Office visits
 - Dental work
 - Orthodontia
 - Glasses
 - Contacts
 - Chiropractic
 - Massage therapy
- Expenses that are cosmetic in nature are not eligible.

Limited Purpose Expense Account (Annual Maximum \$2,650)

The Limited Purpose Expense Account allows you to pay for out-of-pocket dental, vision, and preventative care expenses with tax-free dollars. This type of account is for employees enrolled in a High Deductible Medical Plan and enrolled in a Health Savings Account (HSA).

- Expenses for you, your spouse and dependents are eligible for reimbursement, regardless if they are covered on your medical plan.
- The Limited Purpose Expense Account is a pre-funded benefit. This means you have access to your full annual election amount at any time during the plan year.
- Estimating future expenses is an important step as you prepare to enroll in an account. The more accurate you are in estimating your expenses the better the plan will work for you!

Common Eligible Expenses

- Dental cleanings and x-rays
 - Root canals
 - Crowns
 - Bridges
 - Orthodontia
 - Glasses
 - Contacts
- Expenses that are cosmetic in nature are not eligible.

Show me my pre-tax solutions continued:

Dependent Care Expense Account

Child care can be one of the single largest expenses for a family with children. A Dependent Care Expense Account can be used to pay for your qualified day care or adult care expenses with pre-tax dollars which can save you up to \$1700 per year!!

- The Dependent Care Expense Account limit is set by the IRS and is a calendar year limit of \$5,000 per household, \$2,500 if married and filing separately.
- Expenses can be for your dependent children 12 and under, and in some cases elder care, and must be enabling you to work, actively look for work or be a full-time student.

Common Eligible Expenses

- Child Care
- Preschool
- Before and after school care
- Day Camps

Expenses for school tuition and overnight camps are not eligible.

Premium Only Plan (POP)

The Premium Only Plan allows you to pay for group medical, dental and vision premiums with tax free dollars.

- Medical, dental, and vision premiums may be set-up as non-taxable with the completion of a one-time enrollment form.

Navigate My Benefits:

Election and Claim Filing Period

Open enrollment period is a great time to look at your benefits and estimate your out-of-pocket expenses. Be sure to only elect an amount that you know you will use during your plan year. At the end of the plan year you will have a claim filing period to turn in any leftover claims for your benefits. Money left in the plan after the end of the claim filing period and 2 ½ month Grace period is subject to the Use-or-Lose rule and cannot be refunded to you.

Grace Period

Your plan has a special 2 ½ month Grace Period after the end of the plan year. This feature gives you an additional 2 ½ months to incur expenses against your Health Care, Limited Purpose, and Dependent Care Expense Accounts. All expenses incurred during the grace period will automatically deduct out of the prior year's arrangement.