





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.
- If plan terminates mid-year due to qualifying event submit claims for reimbursement of expenses incurred prior to plan termination.

Tax Savings

Federal, state, and FICA taxes may lower your take home pay about 30%. 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. This means you save about 30% on out-of-pocket healthcare and/or dependent care expenses when you use your FSA.

Visit or contact us:

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SISC Flex Plan

How do I access my benefits?

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!

Manual Claims

Manual claims may be submitted online or by e-mail. 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.

Mobile Pay

Navia mobile pay is available for any

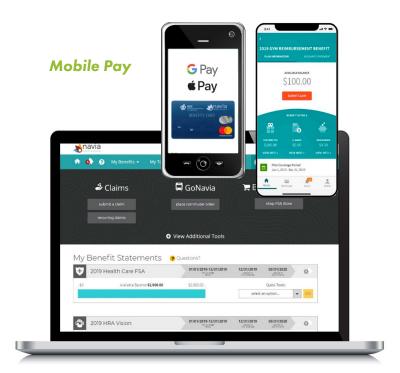
participant that has the Navia Benefit Card. Navia Mobile Pay is a payment option that allows you to pay for eligible benefit account expenses digitally through your mobile device.

MyNavia 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.

Navia Benefit Card

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



Easy debit card payment







SISC Flex Plan

What plans are offered under our SISC Flex Plan?

Health Care Expense Account

Annual Maximum \$3,200.00

The Health Care Expense Account allows you to pay for out-of-pocket medical, dental, vision, pharmacy, and over-the-counter expenses with tax-free dollars. Expenses that are cosmetic in nature are not eligible.

Eligible expenses may be viewed on the Navia website at: <u>https://www.naviabenefits.com/participants/</u> resources/expenses/?benefit=health-care-fsa

- 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!

Limited Purpose Expense Account

Annual Maximum \$3,200.00

The Limited Purpose Expense Account allows you to pay for out-of-pocket dental and vision expenses with taxfree dollars. This type of account is for employees enrolled in a High Deductible Medical Plan and enrolled in a Health Savings Account (HSA). Expenses that are cosmetic in nature are not eligible.

Eligible expenses may be viewed on the Navia website at: <u>https://www.naviabenefits.com/participants/</u> resources/expenses/?benefit=limited-health-care

- 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!





SISC Flex Plan

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.

Eligible expenses may be viewed on the Navia website at: <u>https://www.naviabenefits.com/participants/</u> resources/expenses/?benefit=day-care-fsa

- 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 elder care. Care must be to enable you and spouse to work, actively look for work or be a full-time student.

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 onetime enrollment form.
- If the employer has the automatic pre-tax salary reduction option approved by SISC Flex the enrollment form would only be completed for post-tax elections.

Election and Claim Filing Period

Carefully estimate out-of-pocket expenses for the calendar year. Be sure to only elect an amount that you know will be used during the plan year. Claims must be submitted by no later than March 31 following the close of the Plan Year to which the Grace Period relates. 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-Loss 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 plan.