2020 MEDICAL AND DEPENDENT CARE FLEXIBLE BENEFITS ENROLLMENT
ENROLLMENT PERIOD IS OCTOBER 1, 2019 TO OCTOBER 31, 2019

Note: If you enrolled in the CDHP health plan with the Health Savings Account you cannot enroll in a traditional FSA for medical expenses you must choose the Limited FSA.

The Flexible Benefits Plan at the University is an important part of your overall benefits package. This Plan permits the University to exclude, from both Federal Income and Social Security taxes, premiums paid by you for group medical insurance, dental insurance and amounts you contribute to a medical and/or dependent care reimbursement account. The administration of our medical and dependent care flexible spending account (FSA) programs are overseen by a company called PayFlex. The benefits of this program include:

- **Fast reimbursement** – Once claims are approved, funds can be deposited in your personal bank account the next day. No more waiting until pay day.
- **Faster claims submission** – Claims may be submitted electronically online, faxed or through a mobile application on your smartphone.
- **PayFlex Card debit card** – A debit card will be provided to allow point of sale purchases.
- **Online planning tools** – These include savings calculators that will assist you in determining the amounts to contribute to your plan and the estimated tax savings.
- **Stateofrn.payflexdirect.com** – Check account balances, claim history or amounts deducted from your pay. All of this information is available in real time on the PayFlex website. You create your own account and you will also receive access to listings of eligible items and other educational materials.
- **Payflex Mobile app** – You can access your account information and file claims through an app that is downloaded to your smartphone.

What is a Flexible Spending Account?

If you paid for any out of pocket medical or dependent care expenses this year and are not currently enrolled in the University’s Flexible Spending Account plan, you are paying more in taxes than you would have if you were enrolled in the program. A flexible spending account allows you to take money from your compensation and place it into an account for medical and dependent care expenses. These funds are not taxed, thereby potentially saving you hundreds of dollars. The money put aside in the account is then used by you to pay eligible medical and dependent care expenses. These payments can be made via the debit card provided or you can make the payments and request reimbursement from the funds in your account. **Keep in mind that if you enroll in the CDHP and choose an HSA you cannot enroll in a traditional medical FSA, and your spouse cannot have a full scope FSA. You can however choose the Limited FSA.**

How Do I Enroll?

Enrollment is online at stateofrn.payflexdirect.com and instructions are provided on the attached pages titled “Your Guide to Online Enrollment.” If you are enrolling for the first time when you click on Register Now you will be asked to enter your Member ID (this is your social security number) and your 5 digit home zip code. You may contact your campus payroll/human resource office if you need access to a computer. Enrollment must take place during October 1 through October 31 and you must re-enroll each calendar year. Contact the University-wide Administration Payroll Office at 865-974-5251 if you have questions or need assistance.
Your guide to enrolling online
For Higher Education Employees

It’s easy to enroll in a PayFlex® Flexible Spending Account (FSA). Simply visit your PayFlex member website to get started.

Register your PayFlex account
2. Enter your username and password. If you don’t have a username and password, click Register Now.
3. Enter your Social Security Number (SSN) as the Member ID. Be sure to enter your SSN without dashes or spaces (e.g., 123456789).
4. Enter your 5-digit home zip code and click Register.
5. Create your own username and password.
6. Select a security question and enter an answer.
7. Enter your e-mail address and click Confirm.

After you register your account, you’ll see My Dashboard. Now it’s time to enroll in a PayFlex FSA.

Enroll in your account
- After you log in, select Online Enrollment under Quick Links on the left hand navigation bar.
- Select your Employer from the drop down box (if prompted). You’ll see the PayFlex account(s) available to you.
- Select the account(s) that you want to enroll in. If you don’t want to enroll in a particular account, don’t check the box.
- Enter the amount you want deducted from your paycheck each pay period.
  - Please note the minimum and maximum annual deductions are set by your employer. Your annual election is automatically calculated based on the number of pay periods provided by your employer.
  - Click Save My Elections.
  - Review the confirmation screen.
  - Review and accept the terms and conditions. If you agree, click Submit.

You’ll see a final confirmation screen. This page will show the accounts you successfully enrolled in. You’ll also receive a confirmation e-mail from PayFlex.

Stay connected to your account
To help you stay up to date on your account activity, sign up to receive electronic account notifications.
- From My Dashboard, select My Settings.
- Select the notification link. Enter your e-mail address twice.
- Select the notification(s) you wish to receive.
- Click Submit.
Want to reduce your taxable income and increase your take-home pay? Enroll in an FSA and start saving money on eligible health care and/or dependent care expenses.

**Great reasons to enroll in a health care FSA**
- Contribute pretax dollars from your paycheck, up to the Internal Revenue Service (IRS) limit of $2,700.*
- Your full contribution is available at the start of the plan year.
- If you and your spouse both have a health care FSA, you can each contribute up to the IRS limit.
- Pay for eligible health care expenses for you, your spouse and/or your tax dependents. Such expenses may include:
  - Copays, coinsurance and deductibles
  - Dental expenses like orthodontia, crowns and bridges
  - Vision expenses like LASIK laser eye surgery, glasses and contacts
  - Prescription drugs and over-the-counter (OTC) items**

**What are some benefits to enrolling in a dependent care FSA?**
- Contribute pretax dollars from your paycheck, up to the IRS limit of $5,000.* For couples who file tax returns as married filing jointly, each spouse may contribute up to $2,500.
- Funds are for your dependent(s) up to age 12. Or a spouse or dependent incapable of self-care.
- Pay for eligible child and adult care expenses, such as:
  - Day care
  - Before – and after-school care
  - Preschool and nursery school
  - Summer day camp

*These limits are subject to change, and some employers may set a lower limit. Please check your plan details for how much you can contribute.

**You’ll need a written prescription for OTC drugs and medicine.

Note: Standard text messaging and other rates from your wireless carrier may apply when using the PayFlex Mobile app.
Pay the PayFlex way

PayFlex makes it easy to pay for your eligible expenses.
*Use the PayFlex Card®, your account debit card:*
When you use the PayFlex debit card, your expense is automatically paid from your health care FSA. You’ll need to file a claim to pay yourself back for dependent care expenses.
*Pay yourself back: Pay for eligible expenses with cash, check or your personal credit card. Then submit a claim to pay yourself back. You can even have your claims payment deposited directly into your checking or savings account.
*Pay your provider: Use PayFlex’s online feature to pay your provider directly from your account.

Quick tip: Save your itemized statements and detailed receipts for your expenses, as well as your Explanation of Benefits from your insurance carrier. PayFlex may contact you later to request them.

Things to keep in mind

• You can view the IRS contribution limits and a list of common eligible expense items on the PayFlex member website.
• You can carry over up to $500 in unused health care FSA dollars to the next plan year. Check your plan details to confirm.
• You can change your contribution if you have a change in status** such as marital and employment status, number of tax dependents, etc.
• Specific to a dependent care FSA: To use your dependent care funds, you must be working. If you’re married, your spouse must either be working, looking for work, a full-time student or incapable of self-care. You can change your contribution if:
  - There is a change in your provider
  - There is a change in the cost for a provider

Questions?
Visit stateoftn.payflexdirect.com or call us directly at 1-855-288-7936. We’re here to help Monday – Friday, 7 a.m. – 7 p.m. CT, and Saturday, 9 a.m. – 2 p.m. CT.

The Internal Revenue Service (IRS) requires PayFlex to verify that all card purchases are eligible. There may be times during the plan year when PayFlex will ask you to send documentation for a card purchase. If you receive a request, make sure to respond promptly or your card may be suspended.

Common scenarios when PayFlex may need documentation

1. You used the PayFlex Card for an expense that was “estimated” or “pending”.
2. The description PayFlex received from the merchant doesn’t list the actual “type” of service/expense.
3. You used your PayFlex Card at a merchant that doesn’t accept health care cards.

*If your plan allows you to carry over unused health care FSA funds, the grace period doesn’t apply.
**You must apply for a change in your election through your employer. See your employer’s Summary Plan Description for specific details about your plan.

PayFlex Systems USA, Inc.
This material is for informational purposes only. It doesn’t contain legal or tax advice. The information describes the Flexible Spending Account (“FSA”) in general terms. FSA plans are governed by the rules of Section 125 of the Internal Revenue Code and will be administered in accordance with those rules. Estimate fund amounts carefully. Unused funds will be forfeited either after the last day of the plan year or at the end of the grace period if your plan offers one. If your plans allows you to carry over unused health care FSA funds, any unused funds exceeding the carryover amount will be forfeited after the last day of the plan year. Eligible expenses may vary from employer to employer. In case of a conflict between your plan documents and the information in this material, the plan documents will govern. Please refer to your employer’s Summary Plan Description (“SPD”) for more information about your covered benefits. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about PayFlex, go to stateoftn.payflexdirect.com.
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69.03.576.1 Q (6/19)
Swipe your way to smart savings

The PayFlex Card®, your account debit card

Instant access to your money
The PayFlex Card helps make it easier for you to spend the money in your applicable tax-advantaged account. When you use the debit card, it uses the money in your account/s to pay for eligible expenses. Check your plan details at stateoftn.payflexdirect.com to find out what expenses are eligible under your plan.

Frequently asked questions

How does the card work?
Your PayFlex Card can be used to pay for eligible products and services under your plan. When you receive the PayFlex Card in the mail, call the number on the card to activate it and get your personal identification number (PIN).

To use your card, simply swipe and select either “debit” or “credit.” Please note that some merchants may ask you to select “debit.” This means you’ll need to enter your PIN to complete the transaction.

• If your spouse or dependent also has a PayFlex Card, they will use the same PIN you use.
• You can call Card Services for help if you forget your PIN or want to change your PIN.

After you swipe the card, our system automatically checks to see if you have enough funds to pay for the expense.

Important Note: If you’re a State or Higher Education employee and enrolled in both the Health Savings Account (HSA) and Limited Purpose Flexible Spending Account (L-FSA), you’ll use one PayFlex Card for both accounts. Eligible L-FSA expenses will automatically pull from your L-FSA funds first, before using your HSA funds.

Where can I use the card?
You can use your card at qualified merchants where MasterCard® is accepted, and where merchants can process health care cards. This includes doctor and dental offices, hospitals, pharmacies and hearing and vision care centers. You can also use your card at some discount and grocery stores.

What can I pay for with my card?
You can use the card to pay for eligible expenses allowed under your plan. These generally include:

• Deductibles, copays and coinsurance
• Prescriptions and certain over-the-counter (OTC) items*
• Dental and vision costs

To view the list of common eligible expense items, visit your PayFlex® member website.

Note: Some cards might only be able to be used for specific expenses. Check your plan details in your member handbook to confirm before using your card.

What if I don’t use my card to pay for an expense?
You can pay for an eligible expense with cash, check or a personal credit card. You can then use features online or through the PayFlex Mobile® app to pay yourself back. You can also fill out a paper form and fax or mail it to PayFlex.

Note: Remember to include supporting documentation when you submit your claim.

*If you want to use your account funds for OTC drugs and medicine, you’ll need a written prescription from your doctor. After you get the prescription, pay for the expense out of pocket. Then submit a claim to pay yourself back. You can’t use the PayFlex Card.
Quick tips

Spending made simple for the family — If you’re a new member, you’ll automatically receive one card. You can order additional cards online for your spouse or dependent(s) at no cost.

Save your receipts — If you receive a Request for Documentation letter or see an alert message on your account, this means we need documentation for a card purchase.

Access your account balance — Log in at stateoftn.payflexdirect.com to view your available balance on your account dashboard.

Check your card’s expiration date — Your card is valid for five years, as long as you’re an active member. Before your card expires, you’ll receive a new card in the mail.

Replace lost or stolen cards — Please call us right away at 1-888-879-9280 to report a lost or stolen card.

Request for Documentation alerts and letters

There may be times that we need documentation from you to verify that your card was used to pay for an eligible item or service. If this happens, we’ll post an alert message online or send you a Request for Documentation letter.

To help stay up to date on your card transactions, log in to your PayFlex member website to sign up for debit card notifications through email, web alert and text message.

How to respond to a Request for Documentation alert or letter

If we need more information on a debit card purchase, you have three options.

1. Send us the Explanation of Benefits (EOB) statement or itemized receipt for the card payment. You can upload your documentation to the PayFlex site, send through the PayFlex Mobile app, or fax or mail it to us.

2. Substitute another expense for the one in question. Upload, fax or mail* the EOB or itemized receipt for another eligible item or service incurred in the same plan year. (Note: This option is only available if you haven’t been reimbursed for the item or service. And if you haven’t already paid for it with your PayFlex Card.)

3. Pay back your account for the amount in question. Send a personal check or money order directly to PayFlex.

Note: If you don’t respond to the request, your card may be suspended until you either send in the requested documentation or pay back the account.

Questions?

Visit stateoftn.payflexdirect.com, or call us directly at 1-855-288-7936. We’re here to help Monday – Friday, 7 a.m. – 7 p.m. CT, and Saturday, 9 a.m. – 2 p.m. CT.

New identity theft services

All MasterCard debit card holders now have access to Identity Theft Resolution Services at no cost. If your PayFlex Card is lost or stolen and you believe you’re a victim of identity theft, this service can assist you with the process of restoring your identity.

For more information, call the MasterCard Assistance Center at 1-800-MC-ASSIST (1-800-622-7747).

*If you choose to fax or mail documentation, include a copy of your Request for Documentation letter.

PayFlex Systems USA, Inc.

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69-03-620.1 D (7/18)
PayFlex® Reimbursement Account

Take advantage of all the online features and tools available to you. This guide will help you easily manage your account online.

Get started
- Go to stateo.ftn.payflexdirect.com* and click Login.
- If you’re a new user, click Register Now and complete the required fields.

View eligible expense items
After you log in, the list of common eligible expense items is found under quick tips at the bottom right.

View your account balance, deposits and payments
- Under Account Actions click on View account details
- To view all of your claims, select Claims.
- To view all of your payments and deposits, select Transactions.

How to file a claim
You can pay yourself back for an eligible out-of-pocket expense, or you can pay your provider directly from your PayFlex account (if offered). Go to view account details then choose File a claim under Actions.
- Enter your claim information. To add additional claims, select Add Another Expense.
- Once you enter in all of your claims, click Next.
- Confirm all expense details and click Next.
- Select Fax or Upload.

- To “Upload,” use the Browse button. Select your documentation from your computer. To add additional documents, click on Add Additional Document. Note: Each document must be uploaded in PDF format.
- Click Submit.

Order an additional PayFlex Card
You can order an additional card for your spouse or dependent.
- Under Account Settings at the top click PayFlex Card on the left.
- Click on Order a Dependent Debit Card.
- Enter the spouse or dependent name and click Submit

Account Notifications
- Under Account Settings at the top click My profile on the left
- Be sure your info is correct Then click Update.
- Then under Account notifications choose what you want to be notified about and choose how to be notified.

For fast reimbursement, enroll in direct deposit
- Under Account Settings at the top click My profile on the left
- Click on Link a bank account
- Enter your account type, account number, routing number and click on the authorization box Click Save and Continue
- Review your account information. If the information is correct, click Save and Continue. If you need to make a change, click Edit.
PAYFLEX®

Save more money on health costs

PayFlex® Limited Purpose
Flexible Spending Account (L-FSA)

Want to reduce your taxable income and increase your take-home pay? Enroll in an L-FSA and start saving money on dental and vision expenses for you, your spouse and your tax dependents.

Great reasons to enroll in an L-FSA
- Contribute pretax dollars from your paycheck, up to the Internal Revenue Service (IRS) limit of $2,700.*
- Your full contribution is available at the start of the plan year.
- Works great with a health savings account (HSA), as it can help save your HSA dollars for future expenses.
- Eligible expenses may include:
  - Dental and orthodontia care, like fillings, X-rays and braces.
  - Vision care, including eyeglasses, contact lenses and LASIK laser eye surgery.

Pay the PayFlex way
PayFlex makes it easy to pay for your eligible expenses.
- Use the PayFlex Card®, your account debit card: When you use the PayFlex debit card, your expense is automatically paid from your account.
  - If you’re enrolled in both the health savings account (HSA) and L-FSA, you’ll use one PayFlex Card for both accounts.
  - Eligible L-FSA expenses will automatically pull from your L-FSA funds first, before using your HSA funds.
- Pay yourself back: Pay for eligible expenses with cash, check or your personal credit card. Then submit a claim to PayFlex to pay yourself back. You can even have your claims payment deposited directly into your checking or savings account.
- Pay your provider: Use PayFlex’s online feature to pay your provider directly from your account.

*Some employers may set a lower limit. Please check your plan details for how much you can contribute.

69.03.619.1 H (6/19)
Medical Program Details

The Medical Expense Reimbursement Account is one of the tax saving options available to The University of Tennessee employees through the Flexible Benefits Plan. The Medical Expense Reimbursement Account is generally beneficial to anyone who has predictable out-of-pocket medical expenses. There is a maximum contribution limit of $2,700.

Eligible Medical Expenses

As a general rule, any categories of expenses that could be deducted on an IRS Form 1040 for medical expenses, except insurance premiums, can be paid for with pre-tax dollars through the Medical Expense Reimbursement Account. You may file medical expenses for yourself, your spouse (if filing a joint tax return), and any other person you claim as a dependent on your federal income tax return.

The Medical Expense Reimbursement Account allows you to use tax-free money to pay for almost all medical expenses incurred by you and your family that are not already covered by an insurance policy. While everyone has such expenses, the attractiveness of the reimbursement account depends upon the amount of such expenses you and your dependents pay out-of-pocket each year. You may use the account for reimbursement of your co-payments, co-insurance and deductible amounts on dental and vision care not covered by insurance, prescription drugs, the costs of some elective procedures, and a host of other expenses. A complete list is available in IRS Publication 502, or log onto the Payflex website for a listing.

Medical Expenses that are NOT ELIGIBLE:

The following items are not eligible for reimbursement under the Medical Expense Reimbursement Account:

- **Over the Counter Medicines are no longer eligible effective January 1, 2011**
- Premiums for health insurance coverage such as major medical, dental, vision, cancer, life, accidental death, disability, or hospital indemnity insurance
- Health club dues or exercise programs for services not related to a particular medical condition
- Nonessential cosmetic surgery
- Bleaching or other forms of whitening of teeth or cosmetic dentistry
- Diaper service
- Funeral expenses
- Household help
- Advance reimbursement of future or projected medical expenses
- Expenses incurred in a prior plan year and paid during the current plan year
- Medical expenses claimed on your tax return
- Marriage and family counseling
- Massage Therapy to reduce stress or improve general help (it is only eligible if prescribed by a physician for a specific illness, injury, trauma or condition and is accompanied by a letter of medical necessity)
Dependent Care Program Details

The Dependent Care Reimbursement Account (for child care) is another of the tax saving options available to The University of Tennessee employees through the Flexible Benefits Plan. Dependent Care expenses make up a significant part of many family budgets. The tax free Dependent Care Reimbursement Account lets you use tax free dollars to pay for such care if it is necessary to allow you to work and, if you are married, to allow your spouse to work or attend school full-time. (If married, both spouses must be employed unless your spouse is a full-time student for at least five months during the year, or mentally or physically disabled and unable to provide self-care.)

Dependent Care Contribution Limits

Depending upon your circumstances, you can contribute up to $5,000 a year into your Dependent Day Care Reimbursement Account. If you file your income taxes as "head of household," "single" or "married, filing jointly" you may put the full $5,000 a year into your account. If you are married but file a separate federal income tax return, you may deposit a maximum of $2,500 to your Dependent Day Care Reimbursement Account.

Dependent Care Expenses

In order to qualify as eligible expenses, the amounts you spend on dependent day care must meet the following IRS rules:

- You may be reimbursed for charges for day care services either inside or outside your home for eligible dependents under the age of 13. Services must be for the physical care of the child and must not be provided by a spouse or dependent.
- You may be reimbursed for charges for the care of a dependent adult or child who is mentally or physically incapable of self care. To be eligible, services may not be provided by a spouse or dependent and the eligible dependent must regularly spend at least eight hours per day in your household.
- If you use the Dependent Care Reimbursement Account to pay for day care or claim the Child or Dependent Care Tax Credit, you will need to complete Form 2441 when you complete your 1040 tax return (or Schedule 2 for a 1040A tax return).

Dependent Care Expenses that are Not Eligible

The following items are not eligible for reimbursement under the Dependent Care Reimbursement Account:

- Days you and your spouse are not working – including sick leave, vacation days, or breaks in semesters – or days when you do not meet the eligibility requirements
- Care provided by your children who are under the age of 19 or by anyone you claim as a dependent on your federal income tax return
- Transportation, education, clothing, or entertainment
- Babysitting for social events
- Any additional costs for educational workshops or camps offered by day care centers or schools
- Overnight camps are generally not allowed, unless the expenses can be divided by the camp into daytime and nighttime portions
- Kindergarten tuition payments

OTHER ITEMS TO CONSIDER

Retirement Benefits – There will be no impact on your retirement benefits. Retirement contributions and calculations of retirement benefits will be made on the basis of your gross salary.
Maximum amount deferrable under the University’s deferred compensation program – Participation in the flexible benefits program will not have an impact on your deferred income limitations for the 403(b) and 401(k) plans, or 457 plans.

Social Security Benefits – Your social security benefits are based on your social security gross wages, and the Flexible Benefits Plan reduces those wages by the amount of your reimbursement account reductions. Social Security benefits are based on your social security earnings averaged over most of your working lifetime. If you elect to participate in the Flexible Benefits Plan, your social security earnings will be less and you may receive a smaller social security benefit when you retire. This only applies, however, if your reduced salary is less than the social security wage base. The reduction due to reimbursement accounts could be substantial if you participated in the plan for a number of years and elected the maximum reduction allowed by law.

WHAT HAPPENS IF I END MY ACCOUNT DUE TO A LIFE CHANGING EVENT

If you choose to end an account due to a life changing event, your flex plan will be shut down as of the date you request (This date must be within 30 days of the life changing event). You will then have 90 days from the date your account is shut down to submit claims for expenses incurred prior to the end date of your account.

WHAT HAPPENS IF I GO ON LEAVE OF ABSENCE WITHOUT PAY, CHANGE TO TERM, RETIRE, OR OTHERWISE TERMINATE EMPLOYMENT

If you go on leave of absence without pay, change to term, retire, or otherwise terminate your employment, your flex plan will be shut down as of the date you terminate or are placed on leave. You will have 90 days to submit claims for expenses incurred prior to the leave, retirement, or termination date. In the event of your death, your beneficiary or estate may be reimbursed for expenses incurred prior to your death. Claims for those expenses may be filed through April 30th of the following year. An employee returning from a Leave of Absence will not automatically be reenrolled in a reimbursement account program. The employee must request re-enrollment and complete a new enrollment form within the first 30 days after returning.

IMPORTANT REMINDERS

• Even if you had participation in the reimbursement accounts this or any other year, you must re-enroll.

• Canceled checks, credit/debit card receipts, and cash register receipts cannot be used as proof of medical or dependent care service.

• Receipts which only show balance forward, received on account, or payment on account cannot be used. Date of service must be shown.

• The service must have been rendered during the calendar year of the plan. You can only carry over a $500.00 balance from your medical flex into the next year. There is no carry over for dependent care.

• Expense reimbursement requests for prior year plans must be filed by April 30 of the current year for reimbursement.

• Employees participating in the Dependent Care Reimbursement Account are required by the Internal Revenue Service to complete Part III of Form 2441 or Schedule 2 on your income tax return to claim the exclusion. Expenses reimbursed through this Flexible Benefits Program may not be used as tax credits or deductions on your annual federal income tax return.

• Care should be taken to submit each expense only once.