

# White Plains Hospital

## Flexible Spending Account Open Enrollment Effective January 1, 2020

Third Party Administrator:

Benefit Analysis, Inc

Website:

[www.benefitanalysis.com](http://www.benefitanalysis.com)

Phone Number:

973-661-2424

### Healthcare

Healthcare FSA eligible expenses:

Prescriptions, copays, coinsurance, deductibles, vision care, dental and over the counter (OTC) items excluding drugs, medicines and biologicals.

Healthcare FSA ineligible items:

Cosmetic procedures, vitamins/supplements and food under a weightloss program (may be reimbursable with a doctor's letter of medical necessity or prescription)

Eligibility:

Full time employees - 37.5 or more hours per week  
Eligible 1st day of month following date of employment

Plan year dates:

1/1/20-12/31/20

The Plan Year is time period during which you incur your healthcare expenses.

Maximum and minimum annual election:

\$2,700  
\$200

The highest and lowest healthcare election amount you can deduct from your paycheck over the course of the plan year

Claim submission run out:

3/31/2021

The day by which all of your healthcare expenses must be submitted electronically, via fax or postmarked

### Dependent Day Care

Dependent Day Care FSA eligible expenses:

Reimburses expenses incurred for the care of a child age 12 and under; or a disabled dependent incapable of self-care that allow the employee (and spouse, if applicable) to work. Additional restrictions may apply.

Dependent Day Care FSA ineligible expenses:

Overnight camp, care provided by your dependent under the age of 18, babysitting when you are not working, care of your dependent who does not spend at least 8 hours per day in your home

Eligibility:

Full time employees - 37.5 or more hours per week  
Eligible 1st day of month following date of employment

Dates by which expenses must be incurred:

1/1/20-12/31/20

The Plan Year is time period during which you incur your healthcare expenses

Maximum and minimum annual election:  
(\$5,000 per household)

\$5,000  
\$200

The highest and lowest dependent day care election amount you can deduct from your paycheck over the course of the plan year. Additional restrictions may apply.

Claim submission run out:

3/31/2021

The day by which all of your dependent day care expenses must be submitted electronically, via fax or postmarked

### Prepaid Benefit Card - How does it work?

- Two cards will be mailed to your home
- Use at qualified merchants
- Use only for eligible expenses
- Use the same card year to year
- SAVE ALL RECEIPTS

USE  
IT OR  
LOSE  
IT!

Please refer to [www.sig-is.org](http://www.sig-is.org) for a complete list of approved IAS Merchants, participation may be different by location.

### Reimbursement Schedule

Reimbursements are Processed  
Weekly

Healthcare claims reimbursed based on annual election, not contributions to date.  
Dependent Care claims reimbursed based on contributions to date, which could be less than the claimed amount.

**\* For any questions, please contact Benefit Analysis, Inc.**