



Make the Most of Your Flexible Spending Account



A smart, convenient tool to help you maximize your take-home pay

Your flexible spending account (FSA) through Blue Cross & Blue Shield of Rhode Island (BCBSRI) allows you to pay for qualified expenses (such as healthcare and dependent care) with pre-tax dollars. Since taxes are not deducted from your FSA payroll contributions, you'll pay less in federal, state, and FICA taxes—and that means more take-home pay.

Use this guide to learn how your FSA works and how to get the most value from it.

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Your FSA options

FSAs are available for healthcare and dependent care. Your employer decides which type(s) to offer, and you should refer to the Summary Plan Description (SPD) for these benefits to understand which are available and the provisions that apply. This SPD can be obtained from your employer. You can then decide which option(s) works for your personal situation. You will make these choices during your initial enrollment period, or during your employer's open enrollment period.

As you review the types of FSAs, please note the rules regarding funds availability, grace periods, and other provisions.

Healthcare FSA

- You can use your healthcare FSA to pay for qualified medical, dental, and vision out-of-pocket costs.
- You can use your full annual amount on the first day of the plan.
- If your employer offers the **rollover provision**, you are allowed to roll over up to \$610 of unused money from your previous plan year to the new plan year.
- If your employer offers a **grace period**, you have the first 75 days of the new year to use the prior year's balance.
- If your employer does not offer the rollover provision or the grace period, you will lose the money you haven't used at the end of the plan year.



Here is a summary of qualified medical expenses. For a complete list of all eligible expenses, please refer to IRS Publication 502. Please note that the IRS may modify the list of qualified expenses at any time.*

Qualified:		Non-qualified:	
Acupuncture	Ambulance	Cosmetic surgery	Deodorant
Birth control pills	Braces	Electrolysis hair removal	Funeral expenses
Cancer treatment	Chemical dependency	Health club dues	Medicated shampoo and soap
Childbirth/delivery	Chiropractor	Multivitamins	Soap
Contact lenses	Deductibles	Teeth whiteners	Tissues
Dental treatment	Diagnostic tests	Toiletries	
Durable medical equipment			
Eyeglasses	Eye surgery	Prescription drugs	Psychiatric care
Hearing aids	Hospital services	Psychologist	Smoking cessation programs
Insulin treatment	Laboratory fees	Surgeon fees	Transplants
Machine tests	Menstrual products	Transportation for healthcare	Vision expenses
Mental health	Neurologist	X-ray fees	
Non-prescription medicines, like cold and flu pills	Nursing home		
Optometrist			

* This list is for illustrative purposes and is not a complete list of qualified medical expenses. All items on the list may be subject to further limitations. Consult your tax advisor for specific tax advice. Please see IRS Publication 502 for a more detailed listing of qualified medical expenses. This communication is not intended as legal or tax advice.

Dependent Care FSA

- Use this FSA to pay for qualified dependent care expenses, such as childcare and preschool.
- You can contribute up to \$5,000 (or \$2,500 if married and filing separate income tax returns) to your FSA for these expenses.
- Money is available as contributions are deducted from your paycheck throughout the year.
- If your employer offers a **grace period**, you have the first 75 days of the next year to use the prior year’s balance.
- If your employer does not offer the grace period, you will lose the money you haven’t used at the end of the plan year.

Here is a summary of qualified dependent expenses.

For a complete list of all eligible expenses, please refer to IRS Publication 503.

Qualified:

Child daycare programs	Home care (caregiver cannot be spouse or dependent and must be 19+ years of age)	Nursery school programs
Before- and after-school programs		



How to pay for qualified expenses with your FSA

You have three convenient payment options.

Debit card

- If you’re charged at your provider’s office, you can use your FSA debit card to pay the bill right there.
- If you receive a bill in the mail, you can call the issuer to pay with your debit card or provide your debit card number on the bill and mail it back.

Online reimbursement request

Once you have paid for a qualified expense, you can submit an online reimbursement request as follows:

- **Log in to bcbstriwealthcareportal.com** or use the BlueSolutions Spending mobile app. Website log-in instructions are on page 7. Mobile app download instructions are on page 9.
- **Click** the FSA balance bar in the **My Accounts** box within the dashboard and then click **Submit Claim**.
- **Enter** the requested information about the FSA claim you want to submit for reimbursement and upload an image of your receipt.
- When finished, click the link to confirm your submission. You will receive a check in the mail within 5-10 business days.

Paper claim submission

- Once you have paid for a qualified expense, you can submit a reimbursement request by postal mail or email.
- Submit a copy of the receipt for the eligible expense, along with a claim reimbursement form, to BCBSRI’s FSA administrator, London Health Administrators.
- You can find the Claim Reimbursement form under the **Education Resources** tab in your online dashboard.
- Mail to:
CDH Administrator
40 Commercial Way
East Providence, RI 02914
Attn: BCBSRI Claims
- Or email to:
BCBSRIclaims@londonhealthusa.com
Subject: **BCBSRI Claims**

Service Start Date *

select date

Service End Date

select date

Claimant

Cote, Chris

Reimbursement Method *

Check

Account Type *

Flexible Spending Account - FSATEST (2022)

Claim Amount *

\$ 0.00

Whom shall we pay?

Pay Provider

Pay Me

Provider Name

Account Number

How Many Payments?

Recurring Payment

One Time Payment

Comments

CANCEL

NEXT

How to receive your reimbursement through direct deposit

After you submit an eligible paper or electronic claim for reimbursement, you can use your FSA account to set up direct deposit for payment.

Here's how to schedule your direct deposits online:

- **Log into bcsri.wealthcareportal.com.**
- **Click the Menu** tab in the upper left corner, then **My Profile**, and finally, **Reimbursement Preference**.
- **Select Direct Deposit** and complete the necessary data fields within the direct deposit section shown here.
- Once submitted, future reimbursements will be deposited directly into your designated bank account.

Reimbursement Method

☐ Check

☒ Direct Deposit

Bank Name *

Account *

Re-enter Account *

Account Routing *

Re-enter Routing *

Bank Account Type

Saving

Check example

Name

Address

Date

Pay to the order of:

Your bank

Routing Number

Check #

Account Number

Please note: The order of Routing, Account and Check numbers will vary from financial institution to financial institutions and will not necessarily be in the same order as shown above.

By providing my bank account and routing numbers, I agree to allow my administrator to direct deposit plan reimbursements into my accounts. I understand that I can change this directive at any time.

☐



Website instructions and features

Here are the steps to log in to your FSA dashboard and descriptions of key features.

Login Instructions

Step 1 – Go to bcsri.wealthcareportal.com and click **Register** in the upper right corner.

Step 2 – Complete the required registration fields and answer all questions.

Step 3 – After you have successfully registered, you will be directed to your BCSBRI FSA dashboard.

Please note:

If you are enrolled in an FSA and a health savings account (HSA) or health reimbursement account (HRA) program with BCSBRI, you can log in through your **myBCBSRI** account. You do not have to set up a separate login within the FSA portal.

Members who are only enrolled in an FSA need to log in through bcsri.wealthcareportal.com.

Username *

Password *

Password Strength

Confirm Password *

First Name *

Initial

Last Name *

Email *

Registration ID *

Employer Name

Employer Name *

Employee ID *

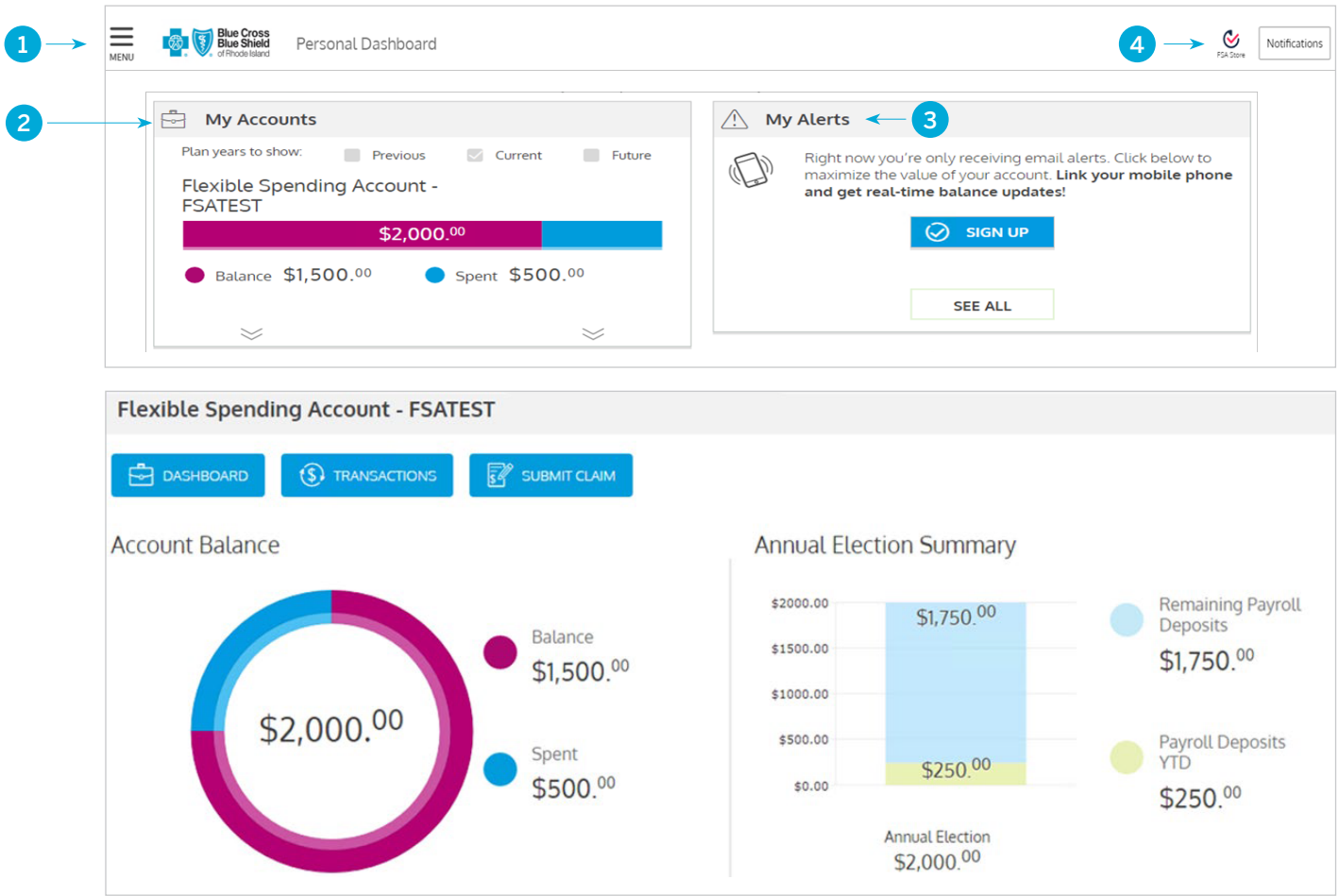
Your employee ID is your 9-digit social security number (no dashes).



Dashboard tools and resources

- 1 **The Menu** includes helpful tools such as view transaction history, process payments, use educational tools, and customize your user profile.
- 2 **My Accounts** displays your annual total, money spent, and balance per account type. If you'd like to view your account management tools (such as transactions and claim submission), click the FSA balance bar (see example).
- 3 **My Alerts** indicates if you have plan notifications available.
- 4 **The FSA Store** allows you to view and purchase eligible healthcare items.

Account Type "FSA" = Health Care Flexible Spending Account
Account Type "DCA" = Dependent Care Flexible Spending Account
Account Type "PKG" = Parking Flexible Spending Account
Account Type "TRN" = Transit Flexible Spending Account
Account Type "FS2/LP2" = Limited Purpose Flexible Spending Account

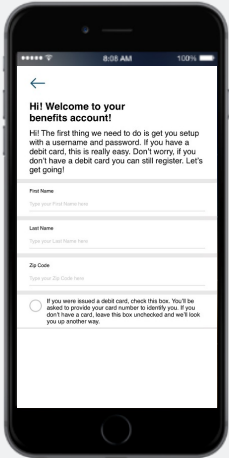


How to use the BlueSolutions Spending app

The **BlueSolutions Spending mobile app** is available for all smartphones and allows you to manage your FSA on the go.

Download the BlueSolutions Spending app from the Apple® App Store or Google Play®

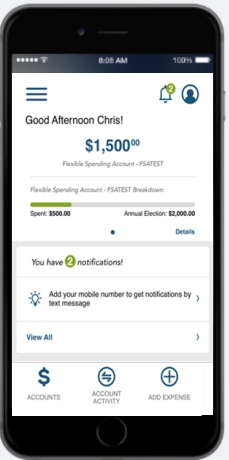
- **Open the app** from your phone.
- **Tap** on the **SIGN UP** link and follow the prompts.
- **Create a username and password** if you are a first-time user. When you tap on the app icon and the log-in screen appears, tap **SIGN UP**.
- **Fill out** the registration page shown to the right.
- **Follow** the remaining on-screen prompts to complete the registration process.



Note: If you have already registered on the BCBSRI FSA member website, you can use the same login credentials for the BlueSolutions Spending mobile app. BlueSolutions Spending cannot be used to manage other health plan benefits or features. Use your myBCBSRI account instead.

Here is an overview of the mobile app features

- **MENU** - Provides access to account management links, eligible expense tools, and account information.
- **ACCOUNTS** - Lets you view account details, contributions, transactions, and preferences.
- **ACCOUNT ACTIVITY** - Displays transaction history, including payment and deposits.
- **ADD EXPENSE** - Gives you access to mobile bill pay tools.



Please note: Standard mobile phone carrier and data usage charges apply. The downloading and use of the BlueSolutions Spending mobile app is subject to the terms and conditions of the app and the online stores from which it is downloaded. Apple and the Apple logo are trademarks of Apple Inc., registered in the U.S. and other countries. App Store is a service mark of Apple Inc. Google Play is a trademark of Google Inc.

FSA annual contribution worksheet

Use these worksheets to help you estimate your healthcare FSA and/or dependent care FSA contribution amount(s).

Your healthcare FSA annual contribution maximum is \$3,050.

For a dependent care FSA, your annual contribution maximum is \$5,000 per family (if you are a head of household or married and file a joint tax return) or \$2,500 (if you are married and file a separate tax return).

Please note: Annual contribution maximums may vary from year to year. You may want to confirm the current amounts with your employer as you work through your calculations.

Healthcare FSA	Dependent Care FSA
Annual Medical Expenses:	Annual Dependent Daycare Expenses:
Deductibles, coinsurance, and copays \$ _____	Daycare center for childcare \$ _____
Routine physical exams \$ _____	In-home care for childcare \$ _____
Well baby care \$ _____	Nursery and preschool \$ _____
Hearing exams, hearing aids \$ _____	Before-/after-school care \$ _____
Prescription drugs \$ _____	Au pair services \$ _____
Other eligible expenses \$ _____	Summer day camps \$ _____
Dental expenses , such as:	Daycare center for elder care \$ _____
Gold fillings, crowns, fixed bridge or other restorative services \$ _____	In-home care for elder care \$ _____
Treatment exceeding your plan's limits \$ _____	
Vision care expenses , such as:	
Exams \$ _____	
Eyeglasses, contact lenses \$ _____	
Other estimated health-related expenses that may exceed your plan's limits	
Outpatient behavioral healthcare \$ _____	
Therapy \$ _____	
Estimated Healthcare FSA Contribution:	Estimated Dependent Care FSA Contribution:
This is the estimated amount you may want to contribute to your healthcare FSA. This amount cannot exceed the annual healthcare FSA maximum amount of \$3,050 per year. \$ _____	This is the estimated amount you may want to contribute to your dependent care FSA. This amount cannot exceed the annual dependent care FSA maximum amount of \$5,000 per year. \$ _____

What to do if you have questions about your health plan or FSA



Call our Customer Service Department at the number printed on the back of your BCBSRI member ID card or at **1-800-639-2227**. Customer service representatives are available Monday through Friday, 8:00 a.m. to 8:00 p.m. (EST).



You can also speak with your employer about your benefits.



This communication has been prepared for informational purposes only, and is not intended to provide, and should not be relied on for, tax, legal, or accounting advice. You should consult your own tax, legal and accounting advisors before engaging in any transaction. HSAs are not insurance. HSAs are individual accounts, and are subject to eligibility and restrictions, including but not limited to, restrictions on distributions for qualified medical expenses set forth in section 213(d) of the Internal Revenue Code.

**IT'S WHAT
WE LIVE FORSM**



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Blue Cross & Blue Shield of Rhode Island is an independent licensee of the Blue Cross and Blue Shield Association.

10/22 MLTI-816302