



## Non-Union

### *Cafeteria Plan provided by Warren Consolidated School District*

Plan Year 1/1/17 – 12/31/17

|                      |                  |                          |
|----------------------|------------------|--------------------------|
| Unreimbursed Medical | \$ 2,600 maximum | \$60.00 per year minimum |
| Dependent Day Care   | \$ 5,000 maximum | \$60.00 per year minimum |

Use pre-tax dollars to pay for items needed throughout the year

**Medical FSA** - Elect up to \$2,600 maximum. Reimburses for deductibles, co-pays, dental, orthodontic, vision, LASIK, weight loss programs (with a note of medical necessity) smoking cessation and some over the counter items for you and your eligible dependents. Reimbursements made by check or direct deposit.

**Effective January 1, 2011 the Health Care Reform Act eliminated “over-the-counter” medicines from the list of eligible items.** Only medicines that are prescribed by a physician with a written prescription will be allowed. Eligible items allowed by the IRS without a doctor’s prescription include diabetes items, diabetic lancets, diabetic supplies, diabetic test strips, glucose meters, syringes and needles, bandages, contact lens solution, denture bond.

**Dependent FSA**- Elect up to \$5,000 maximum. Reimburses for day care for children up through age 12 (includes pre-school tuition) for children, latch key, day camps and elder care needed for older adults (IRS allows \$5,000 per family per calendar year) Reimbursements made by check or direct deposit.

Direct deposit forms are available on [www.employeebenefitconcepts.com](http://www.employeebenefitconcepts.com) under the Flex tab. A new form is not required each year unless you have new bank account information.

Enrollment is allowed only once per year. If you miss this opportunity you will need to wait until next year unless there is a qualifying event.

The following web site has additional flexible spending information.

<http://www.mytakecareplans.com>

**Don’t miss out! Sign up for your FSA during open enrollment!**

**Please submit completed enrollment form to the Employee Benefits Department**

**DEPENDENT CARE BENEFIT:**

IRS extension amendment included allows 2 ½ months grace period for Dependent Care Reimbursement Claims incurred by March 15, 2018 and submitted by March 30, 2018.

**MEDICAL FSA BENEFIT:**

All expenses must occur on or before 12/31/17.

ALL PAPER CLAIMS MUST BE SUBMITTED TO EBC BY (NOON) 12:00 PM 12/31/17

ALL DEBIT CARD SWIPES / TRANSACTIONS MUST BE DONE BY (NOON) 12:00 PM 12/31/17.