

ENROLLMENT



State of Wisconsin

EMPLOYEE REIMBURSEMENT ACCOUNTS

HEALTH CARE FSA | LIMITED PURPOSE FSA | DEPENDENT DAY CARE FSA

2019





WELCOME

Save up to 30% on health care and dependent day care expenses with an Employee Reimbursement Account (ERA)!

It's Your Choice Open Enrollment

- Annual It's Your Choice Open Enrollment Period: **October 1 – October 26, 2018**
- 2019 Benefit Period: **January 1 – December 31, 2019**
- **Note:** You must re-enroll in ERAs each year. Enrollments do not carry forward from year to year.

New Employee Enrollment

If you are electing to enroll in an ERA, you must enroll within 30 days of your date of hire (in an eligible position), or first eligible appointment. Coverage will be effective the first of the month on or following your eligibility date.

Qualified Life Change Event

If you experience a qualified life change event, such as a marriage or divorce, birth or adoption of a child, a change in employment status, or another qualified life change event, you may have the opportunity to enroll or change your coverage outside of the open enrollment period. There are various rules related to life change events. Changes due to a qualified life change event must be made within 30 days from the date of the event.

Important Program Information

Expense Deadline – You must incur and substantiate all eligible expenses by December 31 of the applicable plan year.

Claims Deadline – You must submit all reimbursement requests by March 31 following the close of the applicable plan year.

Re-Enrollment – You must re-enroll each year to continue participation. Enrollments do not carry forward from year to year. If you do not enroll during open enrollment or within thirty days of a qualified life change event, you will not be able to enroll until the next plan year's open enrollment or you experience a qualified life change event.

Carryover – Any unused Health Care Flexible Spending Account (FSA) or Limited Purpose FSA (LPFSA) funds over \$500 at the close of the plan year are not refundable. Any unused Dependent Day Care FSA funds at the close of the plan year will be forfeited.

Ineligible Expenses – FSA funds may be used only for expenses deemed eligible per IRS regulations. It is your responsibility to comply with all plan guidelines and to avoid submitting ineligible requests. If you pay for anything other than eligible expenses with your FSA, you must repay your plan sponsor for the ineligible transaction. Failure to repay will authorize your plan sponsor to collect or withhold such funds from your pay (to the extent permitted by law).

We look forward to meeting your ERA needs!

TASC Customer Care

Phone	844-786-3947 or 608-316-2408 Monday – Friday, 8:00 a.m. to 5:00 p.m.
Online	https://partners.tasconline.com/ETFEmployee
Email	1customercare@tasconline.com
Mail	P.O. Box 7511 Madison, WI 53707
Fax	877-231-1287

ERA OVERVIEW



Save on a wide variety of everyday medical, dental, vision and daycare expenses with an Employee Reimbursement Account (ERA), also known as a Flexible Spending Account (FSA). It's a tax break that's simple to use!

Employee Reimbursement Accounts



Health Care FSA

With a Health Care FSA, you may set aside, for yourself and your tax dependents, tax-free dollars each year for eligible health care expenses not covered by insurance.



Limited Purpose FSA (LPFSA)

The LPFSA is an account you are eligible for if you enroll in a High-Deductible Health Plan (HDHP) and participate in a Health Savings Account (HSA). It allows you to set aside additional money tax-free for certain dental, vision, and post-deductible medical expenses.



Dependent Day Care FSA

With a Dependent Day Care FSA, pre-tax dollars may be used for day care or elder care expenses for eligible dependents allowing you (or your spouse, if married) to work, look for work or attend school full time.

How ERA Plans Work

When you enroll in an ERA, you determine the dollar amount you want to contribute to each account based on your estimated expenses for the upcoming plan year – January 1 to December 31, 2019. Your contributions will be deducted in equal amounts from each paycheck, pre-tax, throughout the Plan Year.

The more you contribute to your ERA accounts, the more you reduce your taxable gross salary. When you pay less in taxes, your take-home pay increases!

Annual Contribution Limits

ERA Pre-Tax Savings Programs	2019	2018
Health Care FSA Contribution Limit	\$2,650	\$2,600
Health Care FSA Carryover Limit	\$500	\$500
Limited Purpose FSA Contribution Limit	\$2,650	\$2,600
Limited Purpose FSA Carryover Limit	\$500	\$500
Dependent Day Care FSA Contribution Limit	\$5,000	\$5,000
Dependent Day Care FSA Carryover Limit	\$0	\$0

Pre-Tax Savings Example

	Without FSA	With FSA
Gross Monthly Pay:	\$3,500	\$3,500
Pre-Tax Contributions	\$3,500	\$3,500
Medical/Dental Premiums	\$0	(\$125)
Medical Expenses	\$0	(\$75)
Dependent Care Expenses	\$0	(\$400)
Pre-Tax Savings Total:	\$0	(\$600)
Taxable Monthly Income	\$3,500	\$2,900
Taxes (Fed., State, FIC):	(\$968)	(\$802)
Post-Tax Expenses:	(\$600)	\$0
Monthly Post-Tax Total:	\$1,932	\$2,098
Net Increase in Take-Home Pay: \$166/month!		
<i>For illustration only. Actual dollar amounts may vary.</i>		

Important Program Changes for 2019

ERA Contribution Limits

- The annual Health Care FSA contribution limit will increase by \$50, from \$2,600 to \$2,650.
- The annual Limited Purpose FSA contribution limit will increase by \$50, from \$2,600 to \$2,650.

HEALTH CARE FSA



A Health Care Flexible Spending Account (FSA) allows you to set aside tax-free dollars each year for health care expenses not covered by insurance. You may use these funds to pay for eligible health care expenses incurred by you, your spouse, and your qualified dependents.*

What are the benefits?

- Pre-tax contributions reduce your taxable income.
- Easiest way to pay for out-of-pocket eligible health care expenses with tax-free money.
- Your total annual Health Care FSA contribution amount is available immediately at the start of the plan year.
- You can carry over up to \$500 remaining in your account from one plan year to the next, so there is minimal “use-it or lose-it” risk.
- Multiple self-service tools available to easily manage your TASC Account and TASC Card transactions.

How does it work?

- Use the tax-savings calculator or annual expense estimate worksheet to help determine how much you should contribute per year.
- Your annual contribution is deducted pre-tax from your paycheck in equal amounts throughout the plan year and deposited into your TASC Account.
- As eligible health care expenses are incurred, you can either use your TASC Card to pay at the point of purchase or submit a request for reimbursement.
- Manage your account 24/7 via the TASC Benefits mobile app or TASC Online account at <https://partners.tasconline.com/ETFEmployee>.

Enrollment Eligibility

- Most full-time or part-time state and UW employees are eligible to participate in a Health Care FSA.
- **Note:** Employees who are classified as fellows, scholars, and research assistants in the UW System, as well as limited term employees, student hourlies, per diems, and other temporary employees are **not** eligible.
- **Note:** Employees who are enrolled in a High Deductible Health Plan (HDHP) are **not** eligible. If you are enrolled in an HDHP, see the Health Savings Account Enrollment Brochure and Limited Purpose Flexible Spending Account information on pages 6 and 7 for benefit options.

Important Considerations

- The It's Your Choice Health Plan imposes an annual deductible of \$250 individual/ \$500 family, office visit copays and an annual out-of-pocket limit of \$1,250 individual/ \$2,500 family on most illness or injury related services in-network. These expenses can be reimbursed through this account.
- Remaining Health Care FSA funds **over** \$500 do **not** carry over. It is important to be conservative in making elections because any unused funds over \$500 left in your Health Care FSA at the close of the plan year are not refundable to you.
- It is a participant's responsibility to read and adhere to the ERA terms and conditions. By accepting and using your TASC Card, you agree to the Cardholder Agreement. You are obligated to satisfy any documentation requirements and to retain those documents and records for tax purposes or in the event of an IRS audit. Refer to the TASC Card Section of the Employee Reimbursement Account (ERA) Participant Guide for more information.
- You may change your Health Care FSA elections during the plan year only if you experience a qualified life change event, such as, a marriage or divorce, birth or adoption of a child, or a change in employment status. Refer to the Change in Status During the Year Section in the ERA Participant Guide for more information.

Annual Health Care FSA Limits	2019	2018
Individual Health Care FSA Limit	\$2,650	\$2,600
Annual Health Care FSA Carryover Max	\$500	\$500

This is the amount the Internal Revenue Service (IRS) allows to be contributed to a Health Care FSA.



Annual Health Care FSA Contribution Limits

Note: The \$2,650 contribution limit applies on an employee-by-employee basis. Thus, \$2,650 is the limit each employee may make per plan year, regardless of the number of other individuals (spouse, dependent, etc.) whose medical expenses are reimbursable under the employee's Health Care FSA. If two spouses are eligible for a Health Care FSA, each spouse may elect to make contributions of up to \$2,650 to his or her Health Care FSA, even if both participate in the same Health Care FSA sponsored by the same employer.

*Refer to the Health Care FSA – Qualified Dependents Section of the ERA Participant guide for more information.



Eligible Health Care FSA Medical Expenses

Below is a partial list of eligible expenses that are reimbursable through a Health Care FSA. Eligible expenses can be incurred by you, your spouse, or qualified dependents. For more information, see your ERA Participant Guide. For the complete list of eligible and ineligible expenses, visit www.IRS.gov and see IRS Publications 502 and 969.

Medical Expenses

- Acupuncture
- Ambulance services
- Birth control/contraceptive devices
- Birth classes/Lamaze¹
- Blood pressure monitor
- Blood sugar test kits/test strips
- Chiropractic therapy/exams/adjustments
- Co-payments
- Crutches¹
- Flu shots
- Hearing aids and batteries¹
- Incontinence supplies
- Insulin and diabetic supplies
- Infertility treatments
- Laboratory fees
- Lactation expenses
- Legal sterilization
- Physical exams
- Physical therapy¹
- Sleep apnea services/products¹
- Smoking cessation programs
- Treatment for alcohol or drug dependency
- Vaccinations
- Wrist supports/elastic straps
- X-ray fees

Dental Expenses

- Cleanings and exams
- Crowns and bridges
- Dental plan co-pays
- Dental surgery
- Dental x-rays
- Dentures
- Diagnostic services
- Fillings
- Orthodontia
- Root canals

Vision Expenses

- Contact lenses and lens solution
- Diagnostic services
- Eye exams
- Eye surgery
- Laser eye surgery/LASIK
- Optometrist/ophthalmologist fees
- Prescription eyeglasses and sunglasses
- Seeing eye dog (*buying, training, and maintaining*)
- Vision plan co-insurance
- Vision plan deductible

OTC Medicines and Drugs

Over-the-counter (OTC) medicines and drugs, except for insulin, require a prescription from your physician to be reimbursable with your Health Care FSA. The prescription must be included with each request for reimbursement.

- Antihistamines
- Cold medicines
- Diaper rash ointments
- First Aid supplies
- Hemorrhoid treatments
- Nicotine patches
- Pain relievers
- Sinus medications
- Yeast infection medications

1: Restrictions may apply. See IRS Publication 502 for more details.

Ineligible Health Care FSA Expenses

Note: Health Care FSA funds may be used only for expenses deemed eligible per IRS regulations. It is your responsibility to comply with all plan guidelines and to avoid submitting ineligible requests. If you pay for anything other than eligible expenses with your Health Care FSA, you must repay your plan sponsor for the ineligible transaction. Failure to repay will authorize your plan sponsor to collect or withhold such funds from your pay (to the extent permitted by law). Below is a partial list of ineligible expenses. For more information, see your ERA Participant Guide. For the complete list, visit www.IRS.gov and see IRS Publications 502 and 969.

- Athletic mouth guards
- Contributions to state disability funds
- Cosmetic surgery
- Diaper services
- Electrolysis or hair removal
- Expenses for services provided outside of the current plan year or your coverage period
- Funeral, cremation & burial expenses
- Health club or athletic club membership dues
- Hygiene products
- Insurance premiums (*all types*)
- Marriage counseling
- Maternity clothes
- Medicare premiums
- Nutritional supplements and vitamins
- Sunglasses and sun clips (*non-prescription*)
- Safety classes (*non-prescription*)
- Teeth whitening

LIMITED PURPOSE FSA



A Limited Purpose Flexible Spending Account (LPFSA) is a pre-tax benefit used to pay for eligible dental, vision care, and post-deductible medical expenses for participants enrolled in a High-Deductible Health Plan (HDHP) and a Health Savings Account (HSA). You may use these funds to pay for eligible expenses incurred by you, your spouse, and your qualified dependents.*

What are the benefits?

- The LPFSA is used to pay for eligible vision and dental expenses that are not covered by your insurance.
- It can also be used to pay for eligible post-deductible medical expenses.
- Pre-tax contributions reduce your taxable income.
- Easiest way to pay for everyday out-of-pocket eligible dental, vision, and post-deductible medical expenses, with tax-free money.
- Your total annual LPFSA contribution amount is available immediately at the start of the plan year.
- You can carry over up to \$500 remaining in your account from one plan year to the next, so there is minimal “use-it or lose-it” risk.
- Multiple self-service tools available to easily manage your TASC Account and TASC Card transactions.

How does it work?

- The LPFSA is similar to the regular Health Care FSA but is designed to work in conjunction with your HDHP and HSA.
- Use our tax-savings calculator or annual expense estimate worksheet to help determine how much you should contribute per year.
- Your annual contribution is deducted pre-tax from your paycheck in equal amounts throughout the plan year and deposited into your TASC Account.
- As eligible expenses are incurred, you can either use your TASC Card to pay at the point of purchase or submit a request for reimbursement.
- Manage your account 24/7 via the TASC Benefits mobile app or TASC Online account at <https://partners.tasconline.com/ETFEmployee>.

Enrollment Eligibility

- **To be eligible for a LPFSA, you must be enrolled in a qualified HDHP and participate in a HSA.**
- You must meet the eligibility criteria for a HDHP and HSA to enroll in an LPFSA.
- Employees who are **not** enrolled in an HDHP are **not** eligible for an LPFSA.
 - If you are **not** enrolled in an HDHP, see Health Care Flexible Spending Account information on pages 4 and 5 for benefit options.
 - The LPFSA cannot be paired with a Health Care FSA.
 - **Note:** Participation in the HSA and/or LPFSA has no bearing on participation in the Dependent Day Care FSA, Parking Account, or Transit Account.
- Most full-time or part-time state and UW employees are eligible to participate in an LPFSA.
- **Note:** Employees who are classified as fellows, scholars, and research assistants in the UW System, as well as limited term employees, student hourlies, per diems, and other temporary employees are **not** eligible.

Annual LPFSA Limits	2019	2018
LPFSA Contribution Limit	\$2,650	\$2,600
LPFSA Carryover Limit	\$500	\$500



Annual LPFSA Contribution Limits

This is the amount the Internal Revenue Service (IRS) allows to be contributed to a Health Care FSA.

*Refer to the LPFSA – Qualified Dependents Section of the ERA Participant guide for more information.

Note: The \$2,650 contribution limit applies on an employee-by- employee basis. Thus, \$2,650 is the limit each employee may make per plan year, regardless of the number of other individuals (spouse, dependent, etc.) whose medical expenses are reimbursable under the employee's LPFSA. If two spouses are eligible for a LPFSA, each spouse may elect to make contributions of up to \$2,650.

Important Considerations

- The LPFSA can only be used to pay for eligible dental, vision, and post-deductible medical expenses.
- Post-deductible medical expenses must be submitted online via your TASC Online account.
- Remaining LPFSA funds **over** \$500 do **not** carry over. It is important to be conservative in making elections because any unused funds over \$500 left in your LPFSA at the close of the plan year are not refundable.
- It is a participant's responsibility to read and adhere to the ERA terms and conditions.
- By accepting and using your TASC Card, you agree to the Cardholder Agreement. You are obligated to satisfy any documentation requirements and to retain those documents and records for tax purposes or in the event of an IRS audit. Refer to the TASC Card Section in the ERA Participant Guide for more information.
- You may change your LPFSA elections during the plan year only if you experience a qualified life change event, such as, a marriage or divorce, birth or adoption of a child, or a change in employment status. Refer to the Change in Status During the Year Section in the ERA Participant Guide for more information.

Eligible Limited Purpose FSA Expenses

Below is a partial list of eligible expenses that are reimbursable through an LPFSA. Eligible expenses can be incurred by you, your spouse, or qualified dependents. For more information, see your Employee Reimbursement Account (ERA) Participant Guide. For the complete list of eligible and ineligible expenses, visit www.IRS.gov and see IRS Publications 502 and 969.

Dental Expenses

- Cleanings and exams
- Crowns and bridges
- Dental plan co-pays
- Dental plan co-insurance
- Dental plan deductibles
- Dental reconstruction and implants
- Dental surgery
- Dental x-rays
- Dentures
- Fillings
- Occlusal guards
- Orthodontia
- Over-the-counter dental products that contain a drug or medication¹
- Root canals

Vision Expenses

- Contact lenses and lens solution
- Diagnostic services
- Eye exams
- Eye related equipment/materials/repair kits
- Eyeglasses (*over-the-counter and prescription*)
- Eye surgery
- Laser eye surgery/LASIK
- Optometrist/ophthalmologist fees
- Over-the-counter vision products that contain a drug or medication¹
- Seeing eye dog (*buying, training, and maintaining*)
- Sunglasses (*prescription only*)
- Vision plan co-insurance
- Vision plan deductibles

1: Over-the-counter dental and vision medications and drugs require a prescription to be LPFSA-eligible. Restrictions may apply. See IRS Publications 502 and 969 for more details.

Note: After you meet your health plan's deductible, you may be reimbursed for all eligible medical expenses, such as co-payments, physical exams, and vaccinations. Reimbursements for post-deductible medical expenses must be submitted online. Expenses may be incurred by you, your spouse, or qualified dependents.

Ineligible LPFSA Expenses

Note: LPFSA funds may be used only for expenses deemed eligible per IRS regulations. It is your responsibility to comply with all plan guidelines and to avoid submitting ineligible requests. If you pay for anything other than eligible expenses with your LPFSA, you must repay your plan sponsor (employer) for the ineligible transaction. Failure to repay will authorize your plan sponsor to collect or withhold such funds from your pay (to the extent permitted by law). Below is a partial list of ineligible expenses; for the complete list of eligible and ineligible expenses, visit www.IRS.gov and see IRS Publications 502 and 969.

- Elective cosmetic surgery
- Eye serums or wrinkle creams
- Insurance premiums
- Mouthwash
- Teeth bleaching/whitening
- Toothpaste and toothbrushes

DEPENDENT DAY CARE FSA



A Dependent Day Care Flexible Spending Account (FSA) is a pre-tax benefit used to pay for eligible day care expenses for qualified dependents in order for you (or your spouse) to work, look for work, or attend school full-time.

What are the benefits?

- Pre-tax contributions reduce your taxable income.
- Your Dependent Day Care FSA Funds become available to you as payroll deductions are taken.
- Easiest way to pay for everyday out-of-pocket eligible dependent day care and/or elder care expenses, with tax-free money.
- Multiple self-service tools available to easily manage your TASC Account and TASC Card transactions.
- Use your TASC Card to pay for eligible dependent day care expenses, or easily submit requests for reimbursement online.

How does it work?

- Use our tax-savings calculator or annual expense estimate worksheet to help determine how much you should contribute per year.
- Your annual contribution is deducted pre-tax from your paycheck in equal amounts throughout the plan year and deposited into your TASC Account.
- The Dependent Day Care FSA is a money-in money-out benefit. Each pay period a contribution posts to your account, after which you may submit reimbursement requests for eligible expenses.
- Manage your account 24/7 via the TASC Benefits mobile app or TASC Online account at <https://partners.tasconline.com/ETFEmployee>.

Enrollment Eligibility

- Most full-time or part-time state and UW employees are eligible to participate in a Dependent Day Care FSA.
- **Note:** Employees who are classified as fellows, scholars, and research assistants in the UW System, as well as limited term employees, student hourlies, per diems, and other temporary employees are **not** eligible.
- For a married individual to be eligible for the Dependent Day Care FSA, your spouse **must** be unable to provide dependent day care and/or elder care because he/she works full-time, is actively looking for work, enrolled in or attending school full-time, or physically/mentally incapable of self-care.

Important Considerations

- The Dependent Day Care FSA is not eligible for annual carryover. It is important to be conservative in making elections because any unused funds in your Dependent Day Care FSA at the close of the plan year are **not** refundable to you.
- It is a participant's responsibility to read and adhere to the ERA terms and conditions.
- By accepting and using your TASC Card, you agree to the Cardholder Agreement. You are obligated to satisfy any documentation requirements and to retain those documents and records for tax purposes or in the event of an IRS audit. Refer to the TASC Card Section in the ERA Participant Guide for more information.
- You may change your Dependent Day Care FSA elections during the plan year only if you experience a qualified life change event, such as, a marriage or divorce, birth or adoption of a child, or a change in employment status. Refer to the Change in Status During the Year Section in the Employee Reimbursement Account (ERA) Participant Guide for more information.

Annual Dependent Day Care Limits	2019	2018
Dependent Day Care FSA Contribution Limit	\$5,000 ¹	\$5,000 ¹
Dependent Day Care FSA Carryover Limit	\$0	\$0



Annual Dependent Day Care Contribution Limits

This is the amount the Internal Revenue Service (IRS) allows to be contributed to a Dependent Day Care FSA.

1: Restrictions may apply.

Additional Dependent Day Care FSA Criteria

- Dependent Day Care FSA expenses **must** be work related. The care must be necessary for you (and your spouse) to work, look for work, or attend school full-time, or if you are physically unable to care for your eligible tax dependent.
- Dependent Day Care FSA expenses submitted for reimbursement during a calendar year may **not** exceed \$5,000.
- The IRS sets the annual contribution limits for the Dependent Day Care FSA. You can contribute up to a maximum of:
 - \$2,500 per year if you are married and file a separate tax return.
 - \$5,000 per year if you are married and file a joint tax return, or if you are single or head of household.
- If you and your spouse are **both** eligible to contribute to a Dependent Day Care FSA through your respective employers, you and your spouse **cannot** each claim \$5,000. The individual limit is \$2,500.
- Dependent Day Care FSA is **not** eligible for annual carryover. All claims must be incurred by December 31 and submitted by March 31. Any unused funds left in your Dependent Day Care FSA at the close of the plan year (December 31) are **not refundable** to you and will be forfeited.
- Special considerations apply to parents who are divorced or separated. A child is a qualified dependent for the custodial parent only, which is the parent with the greater portion of custody during the calendar year, no matter who is entitled to the tax deduction for the child.
- **Note:** Dependent Day Care FSA can only be used for care of eligible dependents, not for health care expenses.

Eligible Dependent Day Care FSA Expenses

Below is a partial list of eligible expenses that are reimbursable through a Dependent Day Care FSA. Eligible expenses may only be incurred by your qualified dependent(s). Health care expenses are **not** eligible. For more information, see your ERA Participant Guide. For the complete list of eligible and ineligible expenses, visit www.IRS.gov and see IRS Publication 503.

- Adult daycare
- After-school and before-school care/program²
- Au pair/nanny salary and fees
- Babysitting in your home or someone else's home¹
- Babysitting by your relative who is not a tax dependent¹
- Care when one parent works days and other parent works nights¹
- Care while looking for work
- Care while on family, personal or medical leave
- Care while you/spouse is working at self-employment¹
- Child daycare or day camp²
- Custodial elder care¹
- Employer-provided on-site daycare²
- Federal employment taxes (FICA, FUTA) of Dependent Day Care provider
- Household services related to dependent care
- In-home care¹
- Nighttime care¹
- Nursery school/ preschool fees or tuition
- Payroll taxes related to eligible dependent care
- Room and board for caregiver (*au pair, nanny, etc.*)
- Senior daycare¹
- Sick child care¹
- Specialized daycare
- Transportation to and from eligible dependent care (*provided by the care provider*)

¹: Care must be work-related. Restrictions may apply. See IRS Publication 503 for more details.

²: Primary purpose must be custodial care, and not educational in nature. See IRS Publication 503 for more details.

Ineligible Dependent Day Care FSA Expenses

Note: Dependent Day Care FSA funds may be used only for expenses deemed eligible per IRS regulations. If you pay for anything other than eligible expenses with your Dependent Day Care FSA, you must repay your plan sponsor (employer) for the ineligible transaction. Failure to repay will authorize your plan sponsor to collect or withhold such funds from your pay (to the extent permitted by law). Below is a partial list of ineligible expenses; for the complete list of eligible and ineligible expenses, visit www.IRS.gov and see IRS Publication 503.

- Child care while performing volunteer work
- Educational, learning, or study skills services
- Field trips or sleep-away camp
- Health care or expenses
- Kindergarten/school tuition
- Meals, food or snacks
- Nursing home care for dependent adult(s)
- Summer school



DEPENDENT DAY CARE FSA ADDITIONAL INFORMATION

Qualified Dependents

Eligibility for the Dependent Day Care Flexible Spending Account (FSA) requires that certain criteria be met. Dependent Day Care FSA expenses **must** be for the care of one or more qualifying individuals, defined as the following:

- A dependent under the age of 13 and for whom a tax exemption can be claimed. Within 30 days of dependent reaching age 13 (but no later) you may reduce the Dependent Day Care FSA annual election, to reflect the total reimbursement or total contribution amount (whichever is greater).
- A spouse who is physically or mentally incapable of self-care, and lives with you for more than half the year.
- A dependent who is physically or mentally incapable of self-care, for whom a tax exemption can be claimed, and who lives with you for more than half the year.
- An elderly parent who lives with you at least half of the year. The care must be incurred while you (or your spouse) are at work, looking for work, or attending school full-time. Care outside the home is eligible if the dependent spends at least eight hours a day in your home.
- **Note:** Special rules apply to children of divorced or separated parents. See Additional Criteria for Children of Divorced or Separated Parents.

Additional Criteria for Children of Divorced or Separated Parents

Even if you cannot claim your child as a tax exemption or tax dependent, he or she is treated as your qualifying dependent if all of the following are true:

- The child is under age 13 and is not physically or mentally capable of self-care.
- One or both parents provide more than half of the child's support for the year.
- Parents are divorced, legally separated, or lived apart at all times during the last six (6) months of the calendar year.
- One or both parents has custody of the child for more than half the year.
- You are the parent with the higher adjusted gross income in a 50/50 custody arrangement.
- You are the child's custodial parent, defined as the parent with custody for the greater portion of the calendar year; OR if parents have equal custody (same number of nights), then the parent with the higher adjusted gross income is the custodial parent.

Note: For a noncustodial parent, the child's expenses are **not** eligible for the Dependent Day Care FSA, even if said parent is financially responsible for providing the care, and even if said parent is entitled to claim the child as a dependent.

- **Only** the custodial parent qualifies for the Dependent Day Care FSA for a taxable year.
- A noncustodial parent may **not** submit expenses for the portion of the year in which they have custody of the child.

Important Care Provider Information

- All persons and organizations providing dependent care must be identified on IRS Form 2441.
- The provider name, address, and taxpayer identification number (or Social Security number) must be included.
- If a center provides care for more than six (6) individuals, the center must comply with all state and local regulations.
- Payments made to relatives who are not dependents can be included, but not to a dependent for whom you can claim an exemption or for your child who is under age 19 at the end of the year (regardless of whether he or she is your dependent).
- You may use IRS Form W-10 to request the required information from the care provider.

HOW TO ENROLL



Annual It's Your Choice Open Enrollment Period: October 1 – 26, 2018
2019 Benefit Period: January 1 – December 31, 2019

Enroll During It's Your Choice

- Visit www.etf.wi.gov/IYC2019 for It's Your Choice Open enrollment information.
- You have **three ways** to enroll during the It's Your Choice Open Enrollment Period:
 - Online
 - Paper
 - Telephone
- You can request a paper application from your payroll or benefits office, or download a copy from the TASC or ETF website.
- Your election will be effective January 1, 2019.
- **Note:** If you are already enrolled in an Employee Reimbursement Account (ERA), you **must** re-enroll each year to continue participation. Enrollments do not carry forward from year to year.

State of Wisconsin & STAR State Employees

- State of Wisconsin, Courts, and Legislature employees who are paid through the STAR System should log in to STAR at <https://ess.wi.gov> to make all benefits elections during the annual It's Your Choice period. Contact your agency payroll and benefits staff with any enrollment questions.

UW System Employees

- Enrollments are done directly through the UW, **not** the TASC portal/website.
- UW System employees should refer to www.wisconsin.edu/ohrwd/benefits or contact your UW institution human resources department for enrollment instructions for 2019.

If You Are a Newly Hired Employee

- If you are electing to enroll in an ERA, you must enroll within 30 days of your date of hire (in an eligible position), or first eligible appointment.
- Coverage will be effective on the first of the month on or following your eligibility date.
- For more information and enrollment instructions, contact your human resources/benefits office.

WEDC Employees

- Enrollments are done directly through WEDC, not the TASC portal/website.
- WEDC employees should refer to **OneLogin > Kronos > My Account > My Benefits > Review/Select Benefits** or contact WEDC human resources for enrollment instructions for the 2019 plan year.

If You Have Experienced a Qualified Life Change Event

- If you experience a qualified life change event, such as a marriage or divorce, birth or adoption of a child, a change in employment status, or another qualified life change event, you may have the opportunity to enroll or change your coverage outside of the open enrollment period.
- There are various rules related to life change events. You must enroll or make changes within 30 days from the date of the qualifying event.
- Contact your human resources/benefit office for more information on qualified life change events to see what your options are, how to enroll, and how to make a change.

Following Enrollment

Once you have enrolled in the ERA, TASC will send these items to you:

ERA Welcome Brochure

- The ERA Welcome Brochure will provide you with information on how to manage your ERA.
- Follow the instructions to set up your TASC Online account.
 - **Note:** Don't forget to update your TASC Online username and password!
- Use your online account to check your balance, submit claims, and manage your notifications.

TASC Card

- Your TASC Card allows you to conveniently pay for eligible expenses.
- Be sure to review the Cardholder Agreement affixed to the card.
- **Note:** If you are a current TASC participant, you will **not** be issued a new TASC Card. You will continue to use your current TASC Card.

Enroll with TASC Online

Reminder: If you are a UW System employee, a WEDC employee, or a State of Wisconsin, Courts, or Legislature employee paid through the STAR system, **do not** enroll via TASC Online or by phone. See the prior page for enrollment details.

1. Determine desired annual contribution amount.
 - a. See page 13 of this ERA Enrollment Brochure for the ERA Annual Expense Estimate Worksheet.
2. Go to the **TASC Online** website:
<http://partners.tasconline.com/ETFemployee>
 - a. If you are a **new TASC Participant**, enter a temporary TASC username and password. This is your first initial, last name, date of birth (mmddyy), and the last four digits of your Social Security Number (SSN).
 - For example: JSmith0101771234
 - b. If you are a **current TASC participant**, enter your current TASC username and password.
 - If you do not remember your username or password, click Forgot Username or Password and follow the reset steps provided.
3. Once **logged in** to your TASC Online Account, click **Enroll Now**.
4. In the **Enrollment** pop-up menu, select the **radial button** which correlates to the plan type in which you wish to enroll – HSA or ERA.
 - a. To enroll in any of the ERA programs, select the second radial button.
 - b. **Note:** There are only two radial button options. All five ERA program offerings correlate to the second radial button.
 - c. If you are planning to enroll in the HSA, you will need to repeat the enrollment process from this screen forward.
5. Review plan details and ERA qualifications to ensure you are eligible for an ERA.
 - a. **Note:** If you are enrolled in a High-Deductible Health Plan (HDHP), you are not eligible for the Health Care Flexible Spending Account (FSA). See the Health Savings Account (HSA) Enrollment Brochure or Limited Purpose Flexible Spending Account (LPFSA) information on pages 6 and 7 for benefit options.
6. When you are ready to continue, click **Begin Your Enrollment Now** in the upper right corner.
7. Enter your **information**.
 - a. We recommend adding your personal email address.
 - b. Click **Continue**.
8. If applicable, add your **dependent(s)**.
 - a. Enter the name(s) of your dependent(s).
 - b. Click **Add Dependent**.
 - c. Your dependent(s) will be displayed on the Eligible Dependents list.
 - d. Click **Continue**.
9. Review the **plan rules**.
 - a. Check the **acknowledgement box** indicating that you have read the plan rules and agree to them.
 - b. **Note:** You **must** do this for **every plan**, even for plans in which you are not enrolled.
 - c. Click **Continue**.
10. Enter your **election amount**.
 - a. Enter your desired annual election amount for the ERA program in which you are enrolling.
 - b. It is your responsibility to ensure your contributions do **not** exceed the IRS maximum annual limits.
 - c. Click **Continue**.
11. Select your reimbursement **Payment Method**.
 - a. You will automatically be enrolled to receive a TASC Card (aka Benny Debit Card).
 - b. Select your preferred method to receive reimbursements for claims filed online.
 - c. If you elect direct deposit, you will need to enter your bank information.
 - d. Click **Continue**.
12. **Verify, submit, and print**.
 - a. Carefully review each section on the **Enrollment Verification** page and verify that your enrollment information is correct.
 - b. If any changes are required, click **Edit Information**.
 - c. When you have verified that everything is correct, **print** a copy of the Enrollment Verification page for your records.
 - d. Click **Submit** to complete your enrollment.
13. Check your email for an enrollment confirmation message from TASC.

Enroll by Telephone

- Contact TASC Customer Care at 1-844-786-3947 or 608-316-2408.
- One of TASC's friendly and knowledgeable Customer Service Representatives will assist you.
- TASC Customer Care is open Monday through Friday, 8:00 a.m. to 5:00 p.m.

Enroll by Paper

- Request a paper application from your human resources/ benefit office, or download a copy from the TASC or ETF website.
- Submit a completed TASC Enrollment Form to your human resources/benefit office.



EMPLOYEE REIMBURSEMENT ACCOUNT ANNUAL EXPENSE ESTIMATE WORKSHEET

This worksheet is intended to assist you with the enrollment process by helping you calculate your applicable expenses and determine which Employee Reimbursement Account (ERA) offerings are right for you. Enter your expenses below and determine the appropriate amount(s) to contribute to your ERA Account(s).

Medical/Dental/Vision Reimbursement Account

Annual medical expenses, such as:

Deductibles and co-pays \$ _____
 Physician visits \$ _____
 Prescriptions \$ _____
 Other: _____ \$ _____

Annual dental expenses, such as:

Deductibles and co-pays \$ _____
 Routine check-ups \$ _____
 Orthodontia \$ _____
 Other: _____ \$ _____

Annual vision expenses, such as:

Exams \$ _____
 Eyeglasses \$ _____
 Contact lenses, solutions, cleaners \$ _____
 Other: _____ \$ _____

Total Estimated
Medical/Dental/Vision Expenses: \$ _____ ÷ **# of Pay Periods**** = \$ _____
Annual Amount (Cannot exceed \$2,650 IRS maximum) Per Pay Period

Dependent Day Care Reimbursement Account

Annual dependent day care expenses, such as:

Payment to dependent care facility or individual \$ _____
 Payment to other care providers \$ _____
 Other: _____ \$ _____

Total Estimated
Dependent Day Care Expenses: \$ _____ ÷ **# of Pay Periods**** = \$ _____
Annual Amount (Cannot exceed \$5,000 IRS maximum) Per Pay Period

Total Per-Pay-Period Reduction

Add the total estimated medical/dental/vision expenses and the total dependent day care estimate. = \$ _____
Per Pay Period

**Biweekly: 24 pay periods | 12-Month: 12 pay periods | 9-Month: 9 pay periods



TASC Online Account

TASC Benefits Mobile App

- Access your ERA funds wherever you are – just swipe to deduct funds from your account.
- A great alternative to submitting paper requests for reimbursements.
- Automatic verification of most eligible expenses.
- Instant access to your account information and account balance 24/7.
- Easy access to your contribution and reimbursement histories.
- Access helpful online tools like tax savings calculators, health care expense tables, and more.
- Self-service feature available, such as signing up for direct deposit, ordering additional TASC cards, and managing your notifications.
- Access your account information and account balance – no matter where you are!
- Submit contribution and reimbursement requests by taking pictures of your receipts with your mobile device camera.
- Download the TASC Mobile App, available for iOS and Android devices – just search for **eflex Benefits** in the Apple App Store or Google Play.



TASC Customer Care | Phone 844-786-3947 or 608-316-2408 | Email 1customercare@tasconline.com

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-877-533-5020 (TTY: 1-800-833-7813)。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-877-533-5020 (TTY: 1-800-947-3529).

- Set up your TASC Online Account.
- Check your email for a link to the ERA Welcome Brochure.
- Check your mail for your TASC Card and Cardholder Agreement



It's Your Choice Open Enrollment Period

October 1 – 26, 2018