Can my spouse and I both enroll?
Yes, if both you and your spouse are state employees and are eligible for the program, you may both enroll. However, keep in mind that the maximum amount your family may contribute to the DCAAccount is set by the IRS at $5,000 per year. Both spouses may enroll in the DCAAccount, but your combined contributions cannot exceed the $5,000 limit.

For the HCSAccount, you and your spouse may each enroll for up to the maximum for the 2017 tax year. Remember that you can each have an account, but claims for expenses may only be charged to one account and cannot be charged to both.

What's the catch? Use it or lose it!
If you overestimate your costs for the year and don't submit requests for reimbursement, you will lose any money remaining in your account at the end of the calendar year. This is the IRS's "use it or lose it" rule. The key is to estimate your expenses carefully. You will have an extra three months after the calendar year ends to file your claims, but they must be for services that were received during the calendar year.

In addition, if you enroll in both the HCSAccount and the DCAAccount, funds can't be transferred between your two accounts. So, the money in your HCSAccount may only be used for health care expenses, and your DCAAccount may only pay for dependent care expenses.

I want to save money on my health care or dependent care expenses and I think this program can help me. Where can I get more information?
Visit the Flex Spending Account website at flexspend.ny.gov to view program details or to order the Flex Spending Account enrollment book. Or call the FSA Hotline for more information.

Customer service representatives will answer your questions and send you enrollment information if you think you want to enroll.

The Flex Spending Account is Easy to Use
- Easy, paperless enrollment
- Direct deposit option
- Toll-free fax line for reimbursement claims
- Secure online claims submission
- Online access to account balances
- Online tax calculators

www.flexspend.ny.gov
FSA Hotline 1-800-358-7202
fsa@goer.ny.gov

New York State Governor’s Office of Employee Relations
Andrew M. Cuomo, Governor

The Flex Spending Account (FSA) is a state employee benefit that saves you money by letting you pay for health care and dependent care expenses with tax-free dollars.

Flex Spending Account
• DEPENDENT CARE ADVANTAGE ACCOUNT
• HEALTH CARE SPENDING ACCOUNT

What is the Flex Spending Account?
The Flex Spending Account (FSA) is a negotiated program that helps state employees save money on their taxes. The program offers two benefits—the Health Care Spending Account (HCSAccount) and the Dependent Care Advantage Account (DCAAccount)—that give you a way to pay for either your health care or dependent care expenses with pre-tax dollars.

How do I enroll or re-enroll?
You can enroll either online at www.flexspend.ny.gov or by calling the FSA Hotline at 1-800-358-7202. An open enrollment period is held annually in the fall and the FSA program operates from January 1 through December 31 each year.

Why should I enroll?
The program saves you money by letting you contribute to your HCSAccount or DCAAccount through automatic payroll deductions before your salary is taxed. The end result is that you reduce your gross salary for federal, state, and social security purposes, thereby lowering your taxes. That saves you money!

How much money will I save?
Savings will vary depending on your annual household income, the number of eligible dependents, and the amount of money you contribute to your HCSAccount or DCAAccount for your eligible expenses.

Can I change the amount of my contribution during the year?
Participation in the program is voluntary. But once you sign up, your contribution amount is set for the calendar year. However, if you experience certain life events (such as marriage, divorce, birth of a child, or certain changes in payroll status) you may be eligible to change your contribution amount in keeping with the event. In addition, if you are enrolled in the DCAAccount, a change in your dependent care provider or a change in the rate that you pay may also allow you to change your contribution.
Eligible HCSAccount Change In Status Events

- Marriage
- Birth or adoption of a child
- Legal separation or divorce
- Beginning/ end of employment for employee
- Beginning/ end of unpaid leave of absence for employee
- Death of dependent or spouse

What expenses can I pay through my HCSAccount?

Your HCSAccount can reimburse the medically necessary expenses your health insurance or other benefit plans don’t cover. These expenses can be for you and anyone in your family, as long as they are your eligible dependents. Examples of eligible expenses include:

- Deductibles
- Dental implants
- Dental services
- Dentures
- Lasik
- Laser eye surgery
- Orthodontia
- Over-the-counter drugs (must be prescribed by a doctor)
- Physical therapy
- Prescription drugs
- Psychiatric services
- Surgery
- Wheelchairs

Breast pumps • Chiropractic care • Contact lenses • Copies • Deductibles • Dental implants • Dental services • Dentures • Diagnostic test • Eyeglasses • Hearing aids • Infertility treatments • Laser eye surgery • Orthodontia • Over-the-counter drugs (must be prescribed by a doctor) • Physical therapy • Prescription drugs • Psychiatric services • Surgery • Wheelchairs

Keep in mind that not all health care expenses can be paid for out of your HCSAccount. The IRS defines an eligible expense as one that is for the prevention or treatment of a physical or mental defect or illness. So, cosmetic procedures, fees for health clubs, dance lessons, exercise equipment, pilates, tennis and sports lessons, yoga and other services that contribute to your overall health can’t be reimbursed from your account.

In addition, an expense will be reimbursed only if the health care service is provided to you, your spouse, or your eligible dependents during the calendar year in which you are enrolled, or during your period of coverage if you enroll after the plan year begins.

How do I get the money from my HCSAccount when I need it?

When you have a health care expense that isn’t covered by health insurance, just fill out a reimbursement request form, attach a copy of the receipt, bill, or invoice from your health care provider, and mail or fax the form to the address or toll-free fax number on the back of the form. You can also submit your claims online through the FSA administrator’s website. The FSA administrator will either send you a check or electronically deposit the money to your bank account. At any time during the calendar year, a claim will be paid in full, up to the annual amount for which you have enrolled, even if your claim is greater than the balance in your account.

During the Plan Year

You may also enroll or change your annual election after the plan year has begun if you experience a change in status (CIS) event. However, only eligible expenses can be reimbursed by your HCSAccount within 60 days of the CIS event. Your eligibility period will start on your 61st consecutive calendar day of employment. Deductions will start as soon as possible after your eligibility period begins.

Health how does the Health Care Spending Account work?

If you are eligible to enroll, you will deposit a maximum of $2,500 annually in pre-tax dollars to pay for health care expenses that are not reimbursed by health insurance or other benefit plans. However, only eligible expenses can be reimbursed by your HCSAccount. The maximum contribution may be subject to change annually since it is indexed to inflation.

Who is eligible for the HCSAccount?

Employees who work for Executive Branch state agencies, the Legislature, the Unified Court System, Roswell Park Cancer Institute, NYS Energy Research and Development Authority, New York Liquidation Bureau, and Environmental Facilities Corporation are eligible to participate if they are permanently employed or expected to be on the payroll for the entire calendar year in which they plan to enroll in the HCSAccount. However, employees who work on a semester or school year basis are also eligible.

In addition, employees must:

- be annual-celled;
- work at least half-time;
- meet the eligibility criteria for enrollment in the New York State Health Insurance Program (NYSHP) and
- if an Executive Branch employee, be either M/C or represented by CSEA, PEF, UUP, NYSOCPBA, Council 82, PBANYS, DC-37, PBA, or NYSPIA.

Causes: seasonal, session, hourly, per diem, and fee-based employees, retirees, non-New York State employees, and employees of the SUNY Research Foundation and Health Research, Inc. are not eligible to participate.

How do I enroll in the HCSAccount?

It’s easy. Just estimate what your out-of-pocket expenses will be for the calendar year in which you plan to enroll. Based on your estimate, decide how much you want to contribute to your HCSAccount. Your estimate could include:

- copayments for prescriptions, office visits, and laboratory costs;
- deductibles and out-of-pocket fees paid to non-participating providers;
- dental, vision, and hearing costs that exceed your insurance amounts; and
- medical services and expenses not covered by insurance.

During the Open Enrollment Period

Apply for enrollment on the Flex Spending Account website at www.flexspend.ny.gov, or phone in your application by calling 1-800-358-7202 before the end of the enrollment period. The amount you want to contribute will be deducted from a maximum of 24 paychecks during the calendar year. You must re-enroll each year during the open enrollment period to continue your benefits for the next calendar year.

During the Plan Year

You may also enroll or change your annual election after the plan year has begun if you experience a change in status (CIS) event. However, only eligible expenses can be reimbursed by your HCSAccount within 60 days of the CIS event. Your eligibility period will start on your 61st consecutive calendar day of employment. Deductions will start as soon as possible after your eligibility period begins.

How do I get the money from my HCSAccount when I need it?

When you have a health care expense that isn’t covered by health insurance, just fill out a reimbursement request form, attach a copy of the receipt, bill, or invoice from your health care provider, and mail or fax the form to the address or toll-free fax number on the back of the form. You can also submit your claims online through the FSA administrator’s website. The FSA administrator will either send you a check or electronically deposit the money to your bank account. At any time during the calendar year, a claim will be paid in full, up to the annual amount for which you have enrolled, even if your claim is greater than the balance in your account.

Dependent Care Advantage Account

Eligibility period will start on your 61st consecutive calendar day of employment. You may also enroll or change your annual election after the beginning of the Plan Year during the open enrollment period to continue your benefits for the next plan year.

During the plan year, you can modify your election to continue your benefits for the next plan year.

During the Open Enrollment Period

You can modify your election to continue your benefits for the next plan year during the open enrollment period.

Eligible Dependent Care Advantage Account Events

- Marriage
- Birth or adoption of a child
- Legal separation or divorce
- Change in custody arrangements
- Disability of dependent (onset or recovery)
- Death of a dependent or spouse

If you do not meet the eligibility criteria for enrollment in the New York State Health Insurance Program (NYSHP) and
- if an Executive Branch employee, be either M/C or represented by CSEA, PEF, UUP, NYSOCPBA, Council 82, PBANYS, DC-37, PBA, or NYSPIA.

Here is a list of some eligible expenses:

- Adult daycare • Babysitter • Books • Day camp • Day care • Day nursery • Day school
- Early childhood care and development • Family day care provider • Home aide • Housekeeper or cook • Nursery school • Pre-school programs • Summer day camp

During the Plan Year

If you are a new employee, your first deduction will occur as soon as possible after you submit your application—usually within two pay periods. If you miss the open enrollment period, only a CIS event will allow you to enroll once the plan year has begun. Such events include:

- Birth or adoption of a child
- Marriage
- Legal separation or divorce
- Change in custody arrangements
- Disability of dependent (onset or recovery)
- Death of a dependent or spouse

Or, you or your spouse experience any of these events:

- Leave of absence
- Change in work schedule
- New employment
- Termination of employment

If you experience one of these changes, you have 60 days to submit a CIS application to enroll, increase, or decrease your DCAAccount deduction or terminate from the DCAAccount. The change you make in your DCAAccount must be consistent with your CIS.

What expenses can I pay through my DCAAccount?

You can use your DCAAccount to pay for dependent care expenses that are not reimbursed by your health insurance due to the expiration of the collective bargaining agreements. Future availability of the Employer Contribution depends on the outcome of negotiations between the State and the unions.

How does the Dependent Care Advantage Account work?

If you are paying a caregiver to care for your child, elderly parent, or disabled spouse in order to work, you can set aside up to $5,000 per year in pre-tax salary through payroll deduction to help pay for those expenses. After caregiving services are provided, simply submit a reimbursement request form for your eligible expenses and you will be reimbursed by your DCAAccount.

Who is eligible for the DCAAccount?

Employees who work for Executive Branch state agencies, the Legislature, and the Unified Court System are eligible to participate in the DCAAccount. Part-time employees are eligible as long as their biweekly paychecks can support their DCAAccount deductions. Employees of NYS Energy Research and Development Authority, Environmental Facilities Corporation, New York Liquidation Bureau, and Roswell Park Cancer Institute are also eligible to participate. Non-New York State employees and employees of the SUNY Research Foundation and Health Research, Inc. are not eligible to participate.

Employer Contribution

The DCAAccount Employer Contribution will end at the conclusion of the 2016 plan year due to the expiration of the collective bargaining agreements. Future availability of the Employer Contribution depends on the outcome of negotiations between the State and the unions.

The amount you want to contribute will be deducted from a maximum of 24 paychecks over the calendar year. If you are a new employee, your first deduction will occur as soon as possible after you submit your application—usually within two pay periods. If you miss the open enrollment period, only a CIS event will allow you to enroll once the plan year has begun. Such events include:

- Birth or adoption of a child
- Marriage
- Legal separation or divorce
- Change in custody arrangements
- Disability of dependent (onset or recovery)
- Death of a dependent or spouse

Or, you or your spouse experience any of these events:

- Leave of absence
- Change in work schedule
- New employment
- Termination of employment

If you experience one of these changes, you have 60 days to submit a CIS application to enroll, increase, or decrease your DCAAccount deduction or terminate from the DCAAccount. The change you make in your DCAAccount must be consistent with your CIS.